# FACTS, FIGURES, & TRENDS 2024-2025

Do you know someone who would like to become an Idaho foster parent? They can call 2-1-1, scan this QR code, or visit healthandwelfare.idaho.gov/foster-care for information.

**A REFERENCE BOOK ABOUT THE IDAHO DEPARTMENT OF HEALTH AND WELFARE**

IDAHO DEPARTMENT OF HEALTH & WELFARE

# HOW TO USE THIS BOOK

Facts, Figures, & Trends is a reference book about the Department of Health and Welfare and is meant for Idaho legislators, media, DHW employees, and anyone else who wants to delve into the department's budget and work. It provides information about Idaho's largest state agency – who it serves, the services it provides, and how those services are paid for.

It covers appropriations for the current state fiscal year as well as highlights and work done in the previous state fiscal year.

FACTS, FIGURES, & TRENDS
2024-2025
Do you know someone who would like to become an Idaho foster parent? They can call 2-1-1, scan this QR code, or visit healthandwelfare.idaho.gov/foster-care for information.
A REFERENCE BOOK ABOUT
THE IDAHO DEPARTMENT OF HEALTH AND WELFARE
IDAHO DEPARTMENT OF HEALTH & WELFARE

Here's how the book is organized:

### First section: Using this book

- Summary of what the book is
- Table of contents
- How to contact DHW

### Second section: The organization

- Message from the Director
- The organization
- Org chart
- Office of the Director
- Total state fiscal year 2024 appropriations
- Appropriated full-time positions
- SFY 2024 DHW Appropriation Fund Source
- SFY 2024 DHW Appropriation by Expenditure Category
- Original SFY 2024 DHW Appropriation

### The rest of the book: The divisions

This book is organized in alphabetical order by the department's eight divisions as they existed in SFY 2023-2024. (As you'll read later in this book, one of the department's divisions has been reorganized to emphasize child welfare outcomes, and the department is now comprised of 11 divisions). Each section begins with an overview of the division, including how it serves the people of Idaho, and contains three pie charts: funding sources, how funds are spent, and how much funding the division received for each program. The rest of the section is devoted to quick highlights and descriptions of the programs in each division and how they serve Idahoans.

If you have comments or questions about the book, contact the Office of Communications at Communications@dhw.idaho.gov.

# TABLE OF CONTENTS


How to use this book ... 2
How to contact DHW ... 5
A message from Director Alex J. Adams ... 8
The Organization ... 9
Organizational Chart ... 11
**Office of the Director ... 12**
**Total SFY 2024 appropriations ... 13**
**Appropriated full-time positions ... 14**
**SFY 2024 DHW appropriation fund source ... 15**
**SFY 2024 DHW appropriation by expenditure category ... 16**
**Original SFY 2024 DHW appropriation ... 17**
**Division of Behavioral Health ... 19**
Division highlights ... 22
Children's Mental Health Services ... 25
Crisis Intervention ... 33
Adult Mental Health Services ... 34
State Hospital West ... 38
State Hospital South ... 40
State Hospital North ... 42
Substance Use Disorder Services ... 44
**Child, Youth, and Family Services ... 48**
Division highlights ... 50
Service Integration ... 51
Children and Family Services ... 53
Developmental Disibilities Services ... 59
Southwest Idaho Treatment Center ... 62
**Indirect Support Services ... 63**
Division of Management Services ... 66
Bureau and program highlights ... 67
Bureau of Operations ... 69
Bureau of Compliance ... 71
Division of Financial Services ... 75
Division of Information and Technology ... 83
**Division of Licensing and Certification ... 91**
Division highlights ... 92
Bureau of Facility Standards ... 94
Certified Family Home program ... 95
Developmental Disabilities agancy/Residential Habiliation Agency Certification Program ... 95
Children's Residential Facilities and Programs ... 96
Residential Assisted Living Facilities Program ... 96
**Division of Medicaid ... 97**
Division highlights ... 102
Bureau of Care Management ... 104
Bureau of Long Term Care ... 105
Bureau of Developmental Disability Services ... 106
Idaho Behavioral Health Plan Governance Bureeau ... 106
Bureau of Pharmaceutical Care ... 107
Bureau of Clinical and Quality Management ... 108
Bureau of Population Health ... 109
Medicaid Operation ... 110
Bureau of Financial Operations ... 111
Bureau of Policy ... 112
Medicaid Management Information System ... 112
**Division of Public Health ... 115**
Division highlights ... 118
Office of Policy, Performance, and Strategy ... 120
Bureau of Clinical and Preventative Services ... 121
Bureau of Environmental Health and Communicable Disease ... 132
Bureau of Community Health ... 140
Bureau of Emergency Medical Services and Preparedness ... 156
Idaho Bureau of Laboratories ... 170
Bureau of Rural Health and Primary Care ... 173
Bureau of Vital Records and Health Statistics ... 179
**Division of Self-Reliance ... 183**
Division highlights ... 186
Self-Reliance Services ... 187
Program Participation ... 189
Benefit Program Services ... 192
Supplemental Nutrition Assistance Program (SNAP; also known as Food Stamps) ... 193
Idaho Child Care Program ... 195
Medicaid Eligibility ... 197
Cash Assistance ... 198
Child Support Services ... 201
Intergovernmental Services ... 202
Partnership Programs ... 203
**Idaho Council on Developmental Disabilities ... 207**
**Idaho Council on Domestic Violence and Victim Assistance ... 210**
**Acronym Glossary ... 214**






# HOW TO CONTACT DHW

**Director Alex J. Adams**
208-334-5500

**Idaho Careline**
2-1-1 or 800-926-2588

**Report child abuse**
855-552-KIDS (5437)

**Child support**
800-356-9868

**Food stamps, Medicaid & other assistance**
877-456-1233

**Report welfare fraud**
866-635-7515

**Report healthcare fraud**
208-334-5754

**Suicide & Crisis Lifeline**
988

**Media requests**

208-334-0668

## On the Web

Department website Healthandwelfare.idaho.gov

DHW information & referrals 211.idaho.gov

Apply for assistance online Idalink.idaho.gov

DHW news and health tips Healthandwelfare.idaho.gov/dhw-voice

Like us on **Facebook** Facebook.com/IdahoHealthandWelfare

Follow us on **X** Twitter.com/IDHW @IDHW

Follow us on **Instagram** instagram.com/dhwstories

Questions about DHW
Questions@dhw.idaho.gov

## DIVISION OF BEHAVORIAL HEALTH
Ross Edmunds, administrator
Ross.Edmunds@dhw.idaho.gov
208-334-6997

### STATE HOSPITAL SOUTH
Randy Rodriquez, administrator
Randy.Rodriquez@dhw.idaho.gov
208-785-8402

### STATE HOSPITAL NORTH
Teresa Shackelford, administrator
Teresa.Shackelford@dhw.idaho.gov
208-476-8117

### STATE HOSPITAL WEST
Cyndee Waterhouse, interim administrator
Cyndee.Waterhouse@dhw.idaho.gov
208-606-7334

## CHILD, YOUTH, AND FAMILY SERVICES (CYFS)
Monty Prow, deputy director
Monty.Prow@dhw.idaho.gov
208-334-0448

### SOUTHWEST IDAHO TREATMENT CENTER (SWITC)
Jamie Newton, administrator
Jamie.Newton@dhw.idaho.gov
208-475-2434

### YOUTH SAFETY & PERMANENCY
Jean Fisher, administrator
Jean.Fisher@dhw.idaho.gov
208-334-0641

### FAMILY & COMMUNITY PARTNERSHIPS
Laura Denner, administrator
Laura.Denner@dhw.idaho.gov
208-334-7233

### EARLY LEARNING & DEVELOPMENT
Alison Tate, administrator
Alison.Tate@dhw.idaho.gov
208-334-0641



## COUNCIL ON DEVELOPMENTAL DISABILITIES
Christine Pisani, executive director
Christine.Pisani@icdd.idaho.gov
208-334-2178

## COUNCIL ON DOMESTIC VIOLENCE AND VICTIM ASSISTANCE
Dana Wiemiller, executive director
Dana.Wiemiller@icdv.idaho.gov
208-332-1540

## DIVISION OF FINANCIAL SERVICES
Misty Lawrence, CFO
Misty.Lawrence@dhw.idaho.gov
208-334-0447

## DIVISION OF INFORMATION AND TECHNOLOGY
Alvino Artalejo, interim administrator
Alvino.Artalejo@dhw.idaho.gov
208-334-0640

## DIVISION OF LICENSING AND CERTIFICATION
Laura Stute, administrator
Laura.Stute@dhw.idaho.gov
208-364-1971

## DIVISION OF MANAGEMENT SERVICES
Staci Phelan, administrator
Staci.Phelan@dhw.idaho.gov
208-334-0632

## DIVISION OF MEDICAID
Juliet Charron, administrator and deputy director
Juliet.Charron@dhw.idaho.gov
208-364-1831

## DIVISION OF PUBLIC HEALTH
Elke Shaw-Tulloch, administrator
Elke.Shaw-Tulloch@dhw.idaho.gov
208-334-5950

## DIVISION OF SELF-RELIANCE
John Bernasconi, administrator
John.Bernasconi@dhw.idaho.gov
208-332-7258

# A MESSAGE FROM DIRECTOR ALEX J. ADAMS

The Department of Health and Welfare's work helps Idahoans help themselves. Our goal is to help people become self-reliant, working with them to identify solutions to their problems so they won't need future assistance from us.

To carry out its mission, the department has a staff of nearly 3,000 and an annual budget of $5.5 billion. I am committed to improving the health and wellbeing of all Idahoans, with the following goals for the department:

1. Strengthen child welfare.
2. Promote upward mobility.
3. Improve behavioral health.
4. Reduce the regulatory burden on department stakeholders.

Importantly, we will advance these goals while being transparent and holding ourselves accountable to the taxpayers we serve.

Given the department's size and complexity, it is imperative that we stay laser-focused on our statutory mission so that we can improve the lives of Idahoans, often in their time of most need.

# THE ORGANIZATION

The Department of Health and Welfare (DHW) serves under the leadership of Idaho Gov. Brad Little. Director Alex J. Adams oversees all department operations and is advised by an 11-member Board of Health and Welfare appointed by the governor.

Many people turn to DHW for help with a crisis in their lives, such as a job loss or a mental health crisis. The department strives to meet those needs while also focusing on strengthening the health, safety, and independence of all Idahoans. To effectively provide services for complex social, economic, and health issues, DHW is organized into 11 divisions (up from eight in SFY 2023-2024):

- Behavioral Health
- Child, Youth, and Family Services
  - Youth Safety and Permanency (formerly part of Family and Community Services)
  - Family and Community Partnerships (formerly part of Family and Community Services)
  - Early Learning and Development (formerly part of Family and Community Services)
- Information and Technology
- Licensing and Certification
- Management Services
- Medicaid
- Public Health
- Welfare (Self-Reliance)

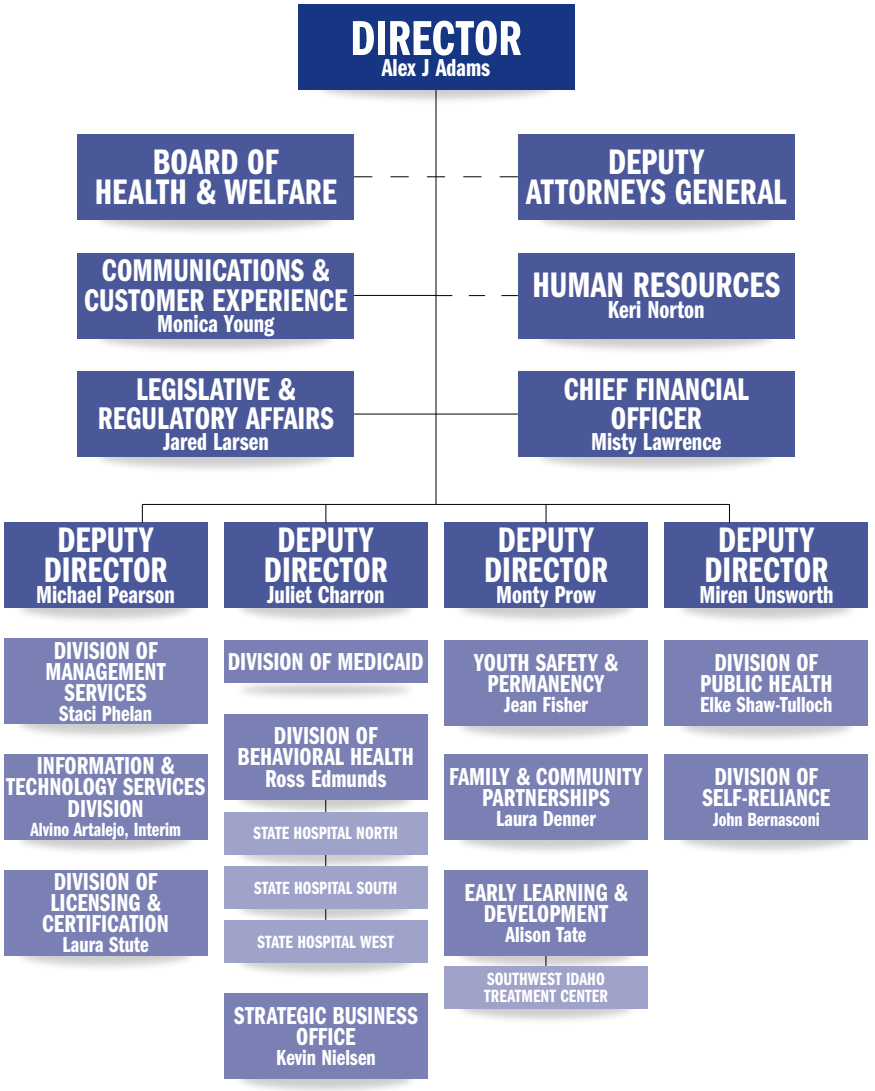
Each division provides services directly to Idahoans or partners with other agencies and local organizations in each community to help the people in those communities.

One of the guiding principles for all DHW programs is to use performance data to make sure the department is maximizing state funding and providing the best services possible. Many of these performance measures are available in this publication. By constantly measuring and collecting performance data, DHW programs are held accountable for continued improvement.

You will find more information about our diverse organization and the amazing work our dedicated employees perform to strengthen the health, safety, and independence of Idahoans on the following pages.

Read the department's Strategic Plan at https://healthandwelfare.idaho.gov/about-dhw/strategic-planning.

# ORGANIZATIONAL CHART



# OFFICE OF THE DIRECTOR

**ALEX J. ADAMS, DIRECTOR**
**208-334-5500**

The Office of the Director oversees and sets the vision for the entire department, working with the Governor's Office and the Idaho Legislature to provide policy direction for services and programs that are effective and economically sound.

The director's office sets a high standard for customer experience and ensures implementation of DHW's Strategic Plan.

The director's office includes:

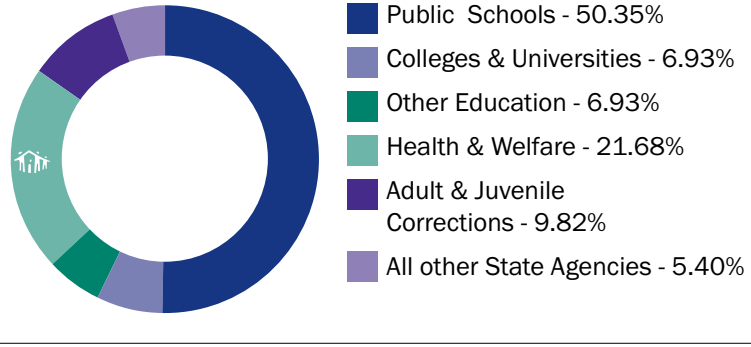
- **Director Alex J. Adams,** 208-334-5500
- **Deputy Director Miren Unsworth,** 208-334-5500
- **Deputy Director Michael Pearson,** 208-334-5500
- **Deputy Director Monty Prow,** 208-334-5500
- **Deputy Director Juliet Charron,** 208-364-5500
- **Legislative and Regulatory Affairs Chief Jared Larsen,** 208-334-0449
- **Chief Financial Officer Misty Lawrence,** 208-334-0447
- **Special Assistant to the Director Adam N. Jones,** 208-334-5502
- **Human Resources Officer Keri Norton,** 208-334-4986
- **Communications and Customer Experience Manager Monica Young,** 208-334-0693
- **Public Information Manager Greg Stahl,** 208-334-0766

The director's office relies on the department's senior leaders to help formulate strategy. Those senior leaders include members of the director's office, division administrators, regional directors, and administrators of State Hospital South, State Hospital North, State Hospital West, and Southwest Idaho Treatment Center.

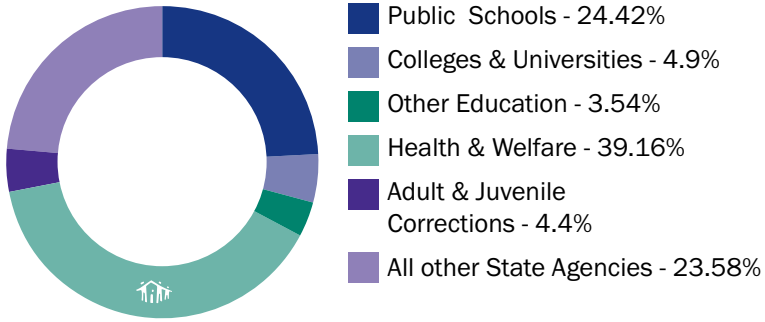


# TOTAL SFY 2025 APPROPRIATIONS

## STATE GENERAL FUND APPROPRIATIONS FOR ALL STATE AGENCIES


Public Schools - 50.35%
Colleges & Universities - 6.93%
Other Education - 6.93%
Health & Welfare - 21.68%
Adult & Juvenile Corrections - 9.82%
All other State Agencies - 5.40%

## TOTAL APPROPRIATIONS FOR ALL STATE AGENCIES


Public Schools - 24.42%
Colleges & Universities - 4.9%
Other Education - 3.54%
Health & Welfare - 39.16%
Adult & Juvenile Corrections - 4.4%
All other State Agencies - 23.58%

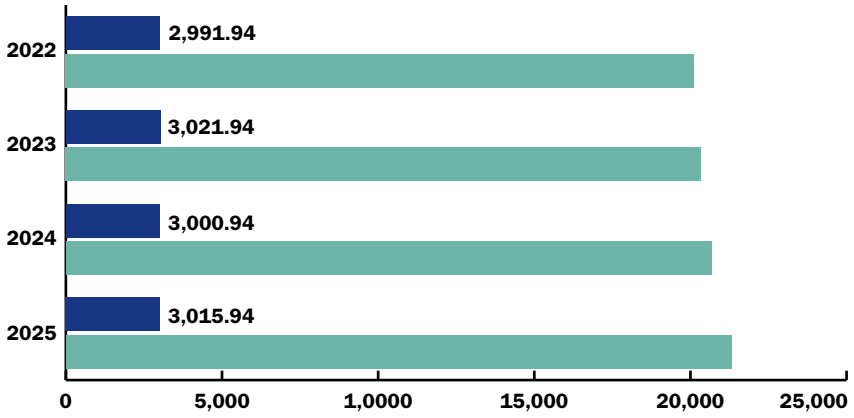
## TOTAL APPROPRIATIONS FOR ALL STATE AGENCIES

*in millions*

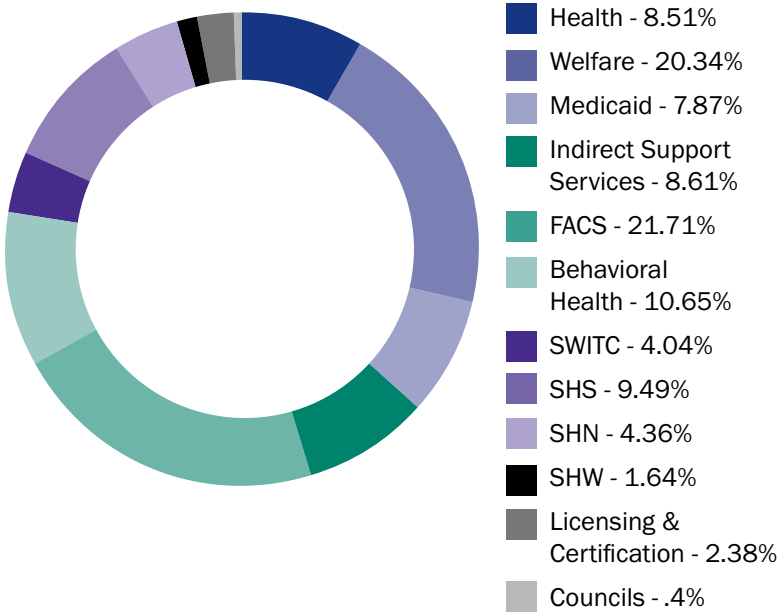
| Functional Area | General $ | % Total | Total Funds $ | % Total |
|---|---|---|---|---|
| **Public Schools** | 2,651.90 | 50.35% | 3,382.84 | 24.42% |
| **Colleges, Universities** | 365.09 | 6.93% | 678.55 | 4.90% |
| **Other Education** | 306.14 | 5.81% | 490.22 | 3.54% |
| **Health & Welfare** | 1,141.75 | 21.68% | 5,425.99 | 39.16% |
| **Adult & Juvenile Corrections** | 517.33 | 9.82% | 609.99 | 4.40% |
| **All Other State Agencies** | 284.62 | 5.40% | 3,267.26 | 23.58% |
| **Total** | 5,266.86 | 100.00% | 13,854.86 | 100% |

# APPROPRIATED FULL-TIME POSITIONS

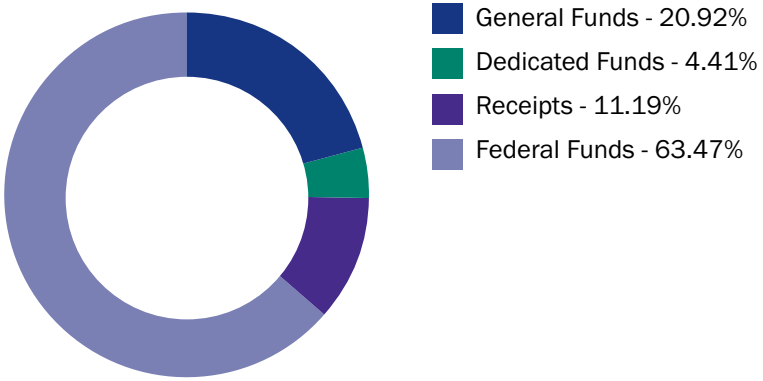
A full-time position (FTP) is equal to 2080 working hours and can include full-time and part-time permanent staff that are not part of a board or group position. The number of allowable FTPs is capped by the Legislature each fiscal year in the agency's appropriation bills.




## SFY 2024 FTP DISTRIBUTION BY PROGRAM

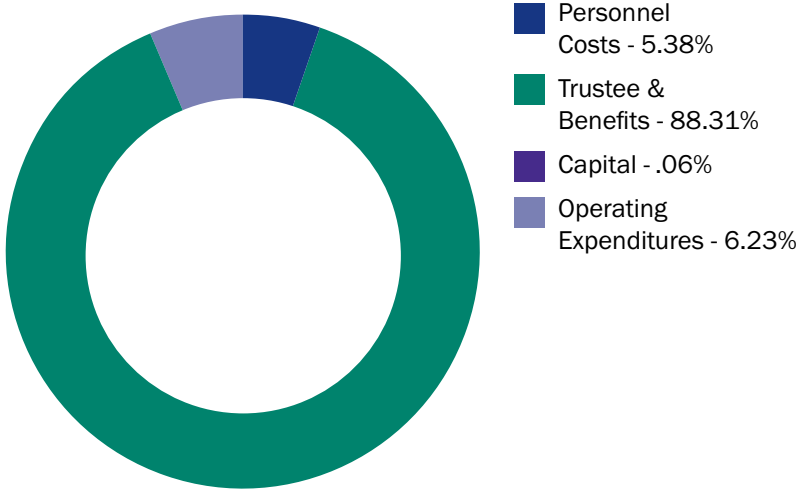



## SFY 2025 DHW APPROPRIATION FUND SOURCE




| Fund Source Amount | |
|---|---|
| General funds | $1,141,490,700 |
| Federal funds | 3,461,736,000 |
| Receipts | 610,539,000 |
| Dedicated Funds: | |
| ARPA State and Local Fiscal Recovery Funds | $1,000,000 |
| Cancer Control Fund | 358,500 |
| Central Cancer Registry Fund | 360,000 |
| Domestic Violence Project Fund | 547,300 |
| Emergency Medical Services Fund | 3,468,000 |
| Emergency Medical Services Fund Iii | 1,700,000 |
| Hospital Assessment Fund | 170,841,900 |
| Idaho Immunization Dedicated Vaccine Fund | 18,970,000 |
| Idaho Millennium Income Fund | 18,676,700 |
| Liquor Control Fund | 650,000 |
| Medicaid Management Information Systems Dedicated Fund | 13,315,800 |
| Opioid Settlement Fund | 1,200,000 |
| Prevention of Minors' Access to Tobacco Fund | 43,800 |
| Rural Nursing Loan Repayment Fund | 250,000 |
| State Hospital North Endowment Fund | 1,890,500 |
| State Hospital South Endowment Fund | 7,851,900 |
| Trauma Registry Fund | 449,400 |
| **Total** | **$5,455,339,500** |

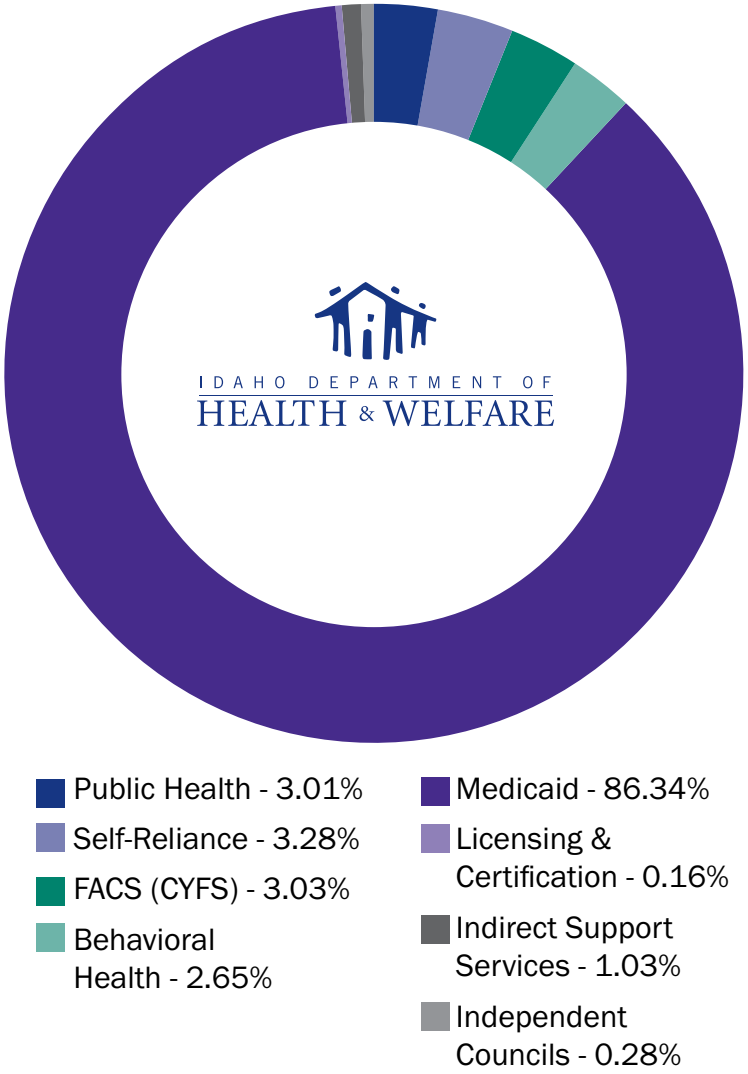
# SFY 2025 DHW APPROPRIATION BY EXPENDITURE CATEGORY




## *Financial data summary*

| By Object | Amount |
|---|---|
| Trustee and Benefits | $4,817.8 Million |
| Personnel Costs | 293.9 Million |
| Operating Expenditures | 339.9 Million |
| Capital | 3.6 Million |
| **Total** | **$5,455.3 Million** |

# ORIGINAL SFY 2025 DHW APPROPRIATION


IDAHO DEPARTMENT OF HEALTH & WELFARE
Public Health - 3.01%
Self-Reliance - 3.28%
FACS (CYFS) - 3.03%
Behavioral Health - 2.65%
Medicaid - 86.34%
Licensing & Certification - 0.16%
Indirect Support Services - 1.03%
Independent Councils - 0.28%

# ORIGINAL SFY 2025 DHW APPROPRIATION

| By Division | FTP | General | Total |
|---|---|---|---|
| **Self-Reliance** | **613.5** | **$24,591,000** | **$89,846,900** |
| **Medicaid** | | | |
| Low-income children/working age adults | | 233,210,400 | 1,041,828,500 |
| Individuals w/disabilities | | 337,577,600 | 1,514,776,900 |
| Dual eligible | | 240,168,800 | 795,900,900 |
| Medicaid expansion | | 82,263,900 | 1,123,526,800 |
| Administration | 237.5 | $27,190,000 | $234,357,600 |
| **Total Medicaid** | **237.5** | **$895,999,700** | **$4,710,390,700** |
| **Licensing & Certification** | **71.9** | **$2,334,500** | **$8,692,400** |
| **Family and Community Services** | | | |
| Child Welfare | 434.80 | 16,538,600 | 50,325,300 |
| Foster/Assistance Payments | 0 | 31,971,700 | 62,825,900 |
| Service Integration | 35 | 732,700 | 6,561,000 |
| Developmental Disabilities | 181.96 | 13,726,400 | 26,994,300 |
| SWITC | 121.75 | 6,768,700 | 15,171,800 |
| Extended Employment Services | 3 | $3,523,700 | $ 3,523,700 |
| **Total FACS** | **776.51** | **$73,261,800** | **$165,402,000** |
| **Behavioral Health** | | | |
| Adult Mental Health | 209.56 | 29,344,700 | 34,437,900 |
| Children's Mental Health | 95.67 | 9,185,600 | 16,558,900 |
| Substance Abuse | 16 | 0 | 27,689,600 |
| Community Hospitalization | 0 | 4,964,000 | 4,964,000 |
| State Hospital South | 286.25 | 5,905,100 | 35,407,900 |
| State Hospital North | 131.6 | 10,563,100 | 17,353,900 |
| State Hospital West | 49.33 | $2,656,300 | $8,082,500 |
| **Total Behavioral Health** | **788.41** | **$62,618,800** | **$144,494,700** |
| **Public Health** | | | |
| Physical Health | 169.18 | 6,734,200 | 141,746,800 |
| EMS & Preparedness | 42.84 | 156,400 | 13,137,800 |
| Suicide Prevention | 3.50 | 1,807,700 | 2,002,700 |
| Laboratory Services | 39 | 2,934,900 | 6,002,600 |
| Healthcare Policy | 2 | $483,700 | $ 1,132,500 |
| **Total Public Health** | **256.52** | **$12,116,900** | **$164,022,400** |
| **Indirect Support Services** | **259.60** | **$23,287,800** | **$56,003,700** |
| **Councils** | **12** | **$564,700** | **$15,115,700** |
| **Department Totals** | **3,015.94** | **$1,141,490,700** | **5,455,339,500** |

# DIVISION OF BEHAVIORAL HEALTH

**ROSS EDMUNDS, ADMINISTRATOR**
**208-334-6997**

The mission of the Division of Behavioral Health (DBH) is to lead a collaborative behavioral healthcare system in Idaho. The vision is that people receive the services they need, when they need them.

To achieve this objective, DBH has two critical functions:

1. Serve as the State Behavioral Health Authority
2. Manage the involuntary treatment system

As the State Behavioral Health Authority, DBH is responsible for the establishment of programs and services that support Idahoans with behavioral health conditions in achieving recovery and supporting them in maintaining their recovery. DBH is charged with researching, promoting, and partnering with stakeholders and communities to implement new and emerging best practices. These include:

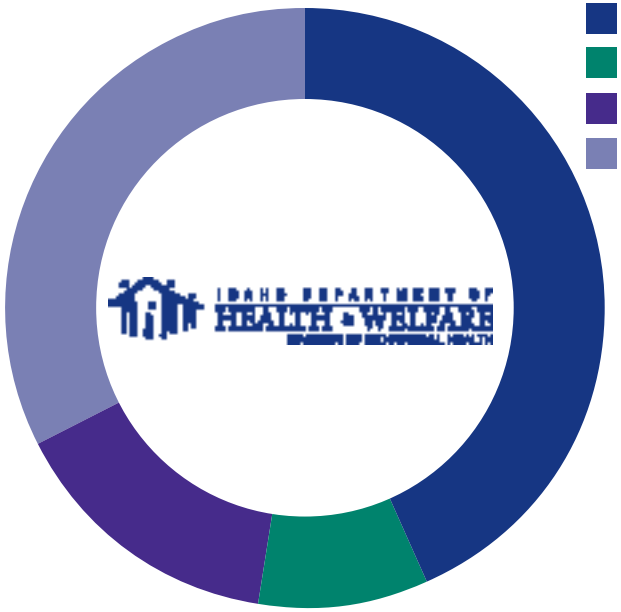
- Developing Centers of Excellence to promote, guide, and oversee the delivery of best practices
- Supporting standards of care that guide essential functions of service delivery and qualifications
- Implementing a quality management, improvement, and accountability (QMIA) culture in relation to the statewide mental health and substance use disorders systems
- Monitoring the behavioral health system including evaluation of service accessibility, adequacy, and effectiveness

DBH is the single state authority agency responsible for managing federal funds dedicated to addressing substance use prevention, treatment, and recovery.

A critically important function of DBH is managing the involuntary treatment system. This role includes the operation of the three state-operated psychiatric hospitals: State Hospital North in Orofino, State Hospital South in Blackfoot, and State Hospital West (a 16-bed facility for adolescents) in Nampa. The role also includes performing court-ordered evaluations, conducting designated exams, and facilitating pre- and post-commitment processes.

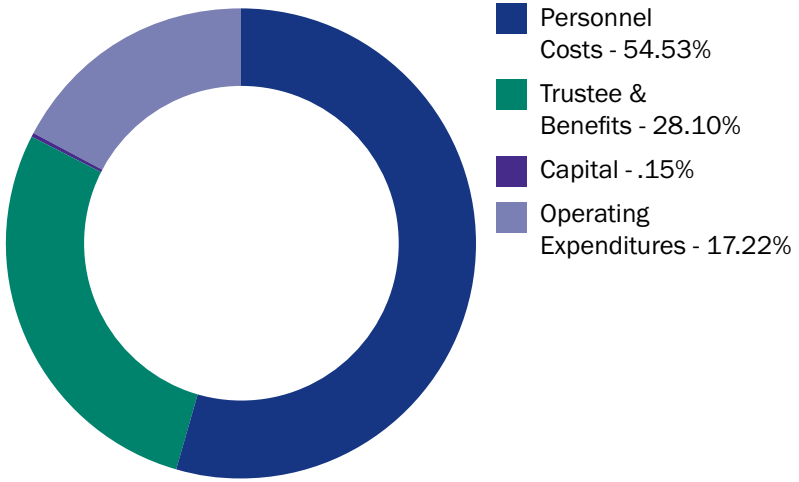
DBH is comprised of Children's Mental Health, Adult Mental Health, and Substance Use Disorder services.

## SFY 2025 FUNDING SOURCES

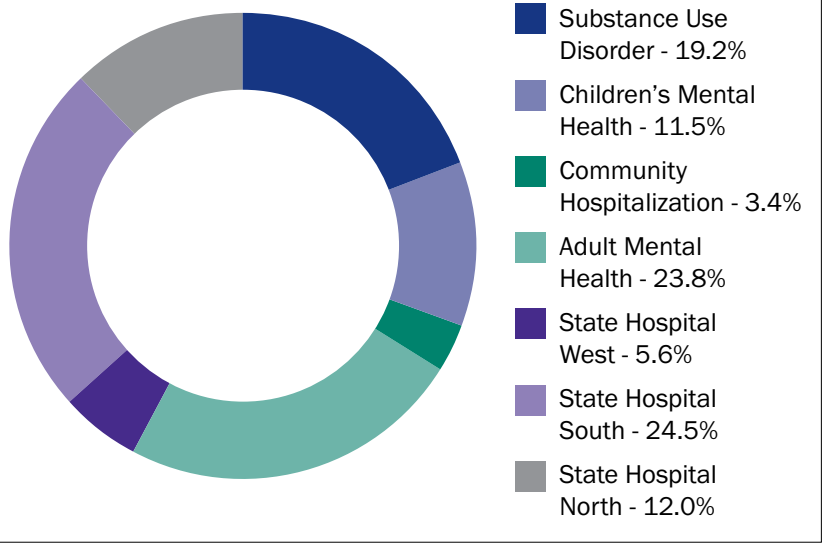



*Authorized FTP: 321.23; Original appropriation for SFY 2024: general funds $ 62,618,800 , total funds $144,503,700; 2.65% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES




## SFY 2025 APPROPRIATION BY PROGRAM


Substance Use Disorder - 19.2%
Children's Mental Health - 11.5%
Community Hospitalization - 3.4%
Adult Mental Health - 23.8%
State Hospital West - 5.6%
State Hospital South - 24.5%
State Hospital North - 12.0%

# SFY 2024 HIGHLIGHTS

## The Division of Behavioral Health Sees Many Changes

The State's behavioral health system has seen numerous changes over the past year. These changes resulted from evolving consumer needs, legislation, federal requirements, changes in funding, and the goal to deliver the highest quality services possible to vulnerable populations in Idaho. The most recent critical change in Idaho's behavioral health system is the procurement and implementation of the new Idaho Behavioral Health Plan contract, which will administer and manage services for both the Medicaid population and the population that needs services but does not have Medicaid.

These changes have resulted in a transformation in the roles and responsibilities of DBH during SFY 2024.

While DBH continues to operate the three state hospitals as part of the implementation of the new Idaho Behavioral Health Plan, it has moved away from providing direct outpatient services. This change allows DBH to focus more intently on serving as the State Behavioral Health Authority and operating the involuntary treatment system.

The system transformation included a reorganization of the division into four bureaus that facilitate involuntary services, enhance the state's behavioral health workforce, create new opportunities for system growth and development, and monitor the quality of care that is being delivered. These four bureaus are Clinical Services, Center of Excellence, System Design and Implementation, and Oversight and Statewide Operations. In addition to the four bureaus, DBH has implemented a Quality Management, Implementation, and Accountability team to develop an overarching quality strategy and support to strategic development.

For more information about the Idaho Behavioral Health Plan, please refer to the Division of Medicaid's section, beginning on page 97.

## The Division of Behavioral Health Launches the Center of Excellence

CENTER OF EXCELLENCE
Division of Behavioral Health

DBH successfully launched the Center of Excellence (CoE) on the go-live date of July 1, 2024. All the CoE Competency Centers were able to begin supporting the new Magellan Behavioral Health Provider Network through training new agencies to six competency center programs: ACT-Assertive Community Treatment, ESMI-Early Severe Mental Illness, PLL-Parenting with Love and Limits, Crisis Mobile Response, Wraparound, and TCOM/CANS. This has been a two-year development and implementation process of the CoE. The department have already received excellent feedback from the agencies on the impact of the training, with overwhelming "Exceeds Expectations" responses on post-surveys from attendees.

## State Hospital West Receives Accreditation

STATE HOSPITAL WEST
TRUST IN US

In SFY 2024, State Hospital West (SHW) applied for and received its first accreditation through The Joint Commission and deemed status from The Centers for Medicare & Medicaid Services.

With the receipt of these accreditations, SHW has received authorization from Medicaid to bill for all Medicaid-covered patients served at SHW for dates of services on or after the date of accreditation. In accordance with Medicaid regulations, SHW has become an approved provider with Magellan under the Idaho Behavioral Health Plan contract.

### Progress is made on the Division's Strategic Plan Performance Measure 1.2

The 2023-2024 Division of Behavioral Health Strategic Plan included Performance Measure 1.2 - Improve Idaho's Substance Use Disorder (SUD) workforce by increasing available college-level courses offered, SUD-specific conferences, and other educational opportunities by June 2024. The Division's SUD team worked with the University of Idaho (U of I) and Idaho State University to offer more addiction studies courses to enrolled students. The additions shorten the time necessary to obtain an Idaho Student of Addiction Studies certification. Furthermore, U of I's WWAMI program developed and launched a sustainable and accessible Idaho SUD Education Program for non-SUD health professionals, increasing their knowledge of the disease and how to identify it in the people they serve.

Two educational opportunities were made available to Idaho SUD services providers as Idaho hosted the 2024 Region 10 Opioid Summit in Boise in July and the 39th annual Idaho Conference on Alcohol and Drug Dependency in May 2024. The DBH SUD team submitted a request in May 2024 and received $300,000 in state Opioid Settlement Funds to support up to 37 full-time Addiction Studies students (or the equivalent) with scholarships for one year, enough time to complete their addiction studies certificate and work toward gaining certification through the Idaho Board of Alcohol and Drug Counseling Certification beginning in SFY25.

# CHILDREN'S MENTAL HEALTH SERVICES

The Division of Behavioral Health (DBH), in partnership with Medicaid, other state agencies, and community stakeholders, oversees the development and implementation of Youth Empowerment Services (YES), Idaho's comprehensive mental health system of care for children. Magellan Healthcare is contracted to manage the YES system on behalf of the Department of Health and Welfare (DHW).

YES was established because of the Jeff D. lawsuit, which led to a settlement requiring agencies to collaborate on identifying and treating youth and families affected by serious emotional disturbance (SED). The system is designed to provide a coordinated approach to care, involving the DHW, the Idaho Department of Education, the Idaho Department of Juvenile Corrections, parents, providers, and other community members.

YES is open to all youth who may be experiencing behavioral health challenges, including those impacted by or at risk for SED. YES provides opportunities to youth and their families who would benefit from the services and support needed to achieve mental wellness.

The YES system of care follows a service delivery model in which all youth-serving systems operate in a coordinated manner. This supports parents and caretakers as the main drivers of the care and treatment they seek. Families receive information, education, coaching, and other support so they can effectively navigate the system and participate in decision-making.

DBH has several unique roles within the development of the YES system of care, including but not limited to the System Design and Implementation Bureau (SDI) and the Centers of Excellence (CoE). SDI strives to advance Idaho's behavioral health system through community partner engagement, promoting prevention, early intervention, and strategic implementation of innovative adult mental health, children's mental health, and substance use disorder services. The CoE actively supports the system

by collaborating on training, mentoring, and overseeing the implementation of evidence-based behavioral health practices.

## Children's Mental Health Accomplishments

YES and SDI's Partnership:

- **Increased access to Youth Crisis Centers:** The success of Idaho's Youth Crisis Centers (YCCs) highlights their vital role in providing timely, accessible, and effective support for youth experiencing crises. By offering a safe and supportive environment, these centers are helping to prevent unnecessary escalation of situations and ensuring that young people receive the care they need. Youth and their families chose YCCs as a preferred option for short-term crisis de-escalation over law enforcement, emergency rooms, or longer-term residential placements.
- **Increased access to Idaho residential treatment services:** Idaho celebrates the opening of the first of three in-state psychiatric residential treatment facilities (PRTF). These services help keep Idaho youth in Idaho. In-state services support successful outcomes through regionalized treatment options that focus on family involvement including post-placement treatment and follow-up. Idaho Youth Ranch, in Southwest Idaho, opened its doors in August 2023 and received federal certification as a PRTF in July 2024. Since opening it has served 22 youth. Two additional facilities are scheduled to open within the next year. Northwest Children's Homes in Northern Idaho will open in January 2025. The final facility, Jackson House, is in Southeast Idaho and plans to open in July 2025.

### YES and the COE's Partnership:

- **Updated YES Screener:** The new YES Screener, developed in collaboration with Magellan, is now live at idahoyesscreener.com. This faster, easier-to-use tool helps Idaho families identify unmet mental health needs in their children and get them the support they deserve. Based on the CANS tool, the YES Screener requires no certification, streamlining the process for early identification and leading to better outcomes for countless Idaho children.
- **Increased access to Crisis Services:** Mobile crisis intervention services are provided statewide through the IBHP with Magellan Healthcare. Magellan has contracted with Community Bridges Inc. and Benchmark Human Services to provide mobile response teams (MRT) throughout Idaho. Children and youth who are in crisis can call 988 to initiate a crisis response. 988 will provide over the phone support and level the response up should an in-person response be needed. In person responses are done by a MRT that can evaluate for safe placement and enhanced services. See crisis section for more details on MRT.
- **Expanding PLL Services in Idaho — A New Provider Network and Medicaid Reimbursement:** Parenting with Love and Limits (PLL) is an evidence-based family treatment program that is effective in treating youth with SED and engaging parent(s)/caregiver(s) in treatment. A new PLL provider network has been developed in coordination with the CoE Bureau and Magellan Healthcare under the IBHP, allowing for an increase in service provision to youth and families across the state. PLL services have recently been approved as Medicaid reimbursable. The PLL competency center under the CoE will provide PLL certification training and ongoing required consultation with providers in the state. In 2024-2025, nine provider teams will be trained, and service implementation initiated, more than doubling the number of PLL teams.

- **Idaho WInS — A New Era of Wraparound Care:** Idaho's Wraparound Intensive Services (WInS) model is building a new provider network. Wraparound is a strengths-based, principle-driven care coordination planning process for youths with the highest need and their families. Historically provided by DBH, WInS will now be provided by the Magellan provider network. The CoE's Wraparound Competency Center is training Wraparound community provider agencies in the Idaho WInS model, providing coaching and technical support to agencies and their Wraparound coordinators. In 2024 – 2025, the CoE plans to train up to 30 Wraparound coordinators, and that will support increased access and service delivery of Wraparound to Idaho youth and their families.

## YES and DBH Clinical Services Partnership (Behavioral Health and Juvenile Justice):

- **Reduced use of court-ordered services:** YES aims to decrease the number of youth court-ordered to receive mental health services. Under the Juvenile Corrections Act (Section 20-511A), courts can order mental health assessments and treatment plans for youth diagnosed with SED. DBH collaborates with county juvenile justice, magistrate courts, Idaho Department of Juvenile Corrections, and parents to support youth with mental health concerns and legal involvement.

## Intensive Home and Community-Based Services (IHCBS)

DBH's continued investment in Intensive Home and Community-Based Services (IHCBS) is helping improve the lives of youth and is also a fiscally responsible approach. By targeting young people at risk of out-of-home placement due to SED and behavioral challenges, IHCBS offers proactive solutions that can prevent costly and often disruptive placements.

Data from the Multisystemic Therapy (MST) program shows that a significant majority of youth (68.75%) were able to remain in their homes, avoiding the expenses associated with foster care or other residential placements. The program has been effective in reducing delinquent behavior, as 68.75% of participants had no new arrests during the past six months.

These results demonstrate the effectiveness of IHCBS in keeping youth on a positive trajectory while reducing the financial burden on the system. By providing programs like MST and other evidence-based services such as the Healthy Foundations Family Program, Multidimensional Family Therapy, PLL, Therapeutic Behavioral Services, and Trust Based Relational Intervention – Caregiver Training, the department has been able to address the complex social, emotional, and behavioral challenges faced by many children and adolescents.

The division's commitment to expanding access to IHCBS has resulted in a notable increase of over 90% in utilization since last year.

## CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

*The following figures show the most prevalent actionable needs and useful strengths of the 10,504 initial Children's Mental Health CANS administered between July 2023 and June 2024.*

| Strengths to build: | | |
|---|---|---|
| | Number of CANS with strengths identified | Percentage of total |
| **Legal Permanency** | 9371 | 89% |
| **Relationship Permanence** | 8923 | 85% |
| **Cultural Identity** | 8472 | 81% |
| **Talents and Interests** | 8333 | 79% |
| **Involvement With Care** | 7812 | 74% |

| Needs: | | |
|---|---|---|
| | Number of CANS with needs identified | Percentage of total |
| **Emotional and/or Physical Regulation** | 5979 | 57% |
| **Anxiety** | 4824 | 46% |
| **Attention/Concentration** | 4458 | 42% |
| **Anger Control** | 4067 | 39% |
| **Family Life Functioning** | 4047 | 39% |

*Data is system wide and includes Initial CANS assessments completed between July 1, 2023, and June 30, 2024, by the Division of Behavioral Health, community providers, and independent assessor agencies. Clients may be represented more than once in the data if they were seen at multiple agencies and had Initial CANS assessments completed at each agency.*

## Child and Adolescent Needs and Strengths (CANS)

The CANS assessment tool is an essential element of Idaho's functional assessment strategy and a centerpiece for the YES system of care. CANS results represent a standardized method of communicating a child's needs and strengths in a manner conducive to person-centered care through collaborative treatment planning. Actionable needs and strengths represent those areas a child or youth, family, and treatment team should focus on during care. Viewing aggregate data in those areas allows the system to be more targeted in future initiatives such as workforce development, treatment development, and partner collaboration.

The CANS tool promotes building quality measures for success in individual treatment and system development. A group of stakeholders, including parents, providers, and subject matter experts, is working on a One Kid One CANS initiative to improve the user experience and to ensure the tool is used to communicate effectively. A new simplified version of the CANS was launched in partnership with Magellan Healthcare on July 1, 2024. Updated level of care recommendations based on the CANS, a parent portal for accessing CANS records, and expanded training opportunities will be implemented in the coming year. Extensive CANS data reports are included in the quarterly YES Quality Management Improvement and Accountability reports.

## Idaho's Vouchered Respite Care

Idaho's Vouchered Respite Care Program is a voluntary program available to parents or primary caregivers of youth with SED. This program provides short-term or temporary respite care by friends, family, or other individuals within the family's natural support system. Qualified families can select a known and trusted individual to provide temporary respite care for their youth. Through the program, families pay the individual directly for respite services and are then reimbursed by the division's contractor. A single voucher may be issued for up to $600 for six months per youth. Two vouchers can be issued per youth per year. During SFY 2024, 442 vouchers were issued, accounting for 23,969 respite hours provided for Idaho youth and their families. By providing families with the resources they need to cope with challenging situations, we can help reduce crises, decrease out-of-home placements, strengthen family bonds, and create healthier communities.

### CHILDREN RECEIVING MENTAL HEALTH SERVICES FROM THE DIVISION OF BEHAVIORAL HEALTH

| | SFY 2020 | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|---|
| Total Children Served | 3,300 | 2516 | 2,189 | 1,715 | 1,371 |
| Court-ordered 20-511A | 373 | 319 | 328 | 279 | 288 |
| Parenting with Love and Limits | 144 | 87 | 95 | 77 | 24[1] |
| Case Management | 810 | 634 | 550 | 471 | 247[2] |
| Alternate Care | 19 | 28 | 44 | 52 | 45 |

*[1]The number of families served with PLL in FY24 was significantly lower than previous years due to staffing.*

*[2] State Mental Health Agency client rolls continue to decrease as services are transitioned to the new Managed Care Provider, Magellan and their provider network.*

# CRISIS INTERVENTION

Crisis intervention services are provided to Idahoans through a continuum of crisis services including a crisis line (Idaho Crisis and Suicide Hotline), mobile response teams, and crisis centers.

The Idaho Crisis and Suicide Hotline (ICSH) accepts 988 calls and serves as the front door of Idaho's crisis services. ICSH responds to crisis calls and texts, offering intervention for all Idahoans regardless of insurance coverage. Real-time coordination of crisis services includes triage, de-escalation, referrals, safety planning, MRT dispatching, follow-up, and emergency services.

Mobile response teams provide crisis intervention services statewide, offering support to individuals in need wherever they are. Services include assessment, de-escalation, safety planning, peer support, coordination with medical and behavioral health services, and follow-up.

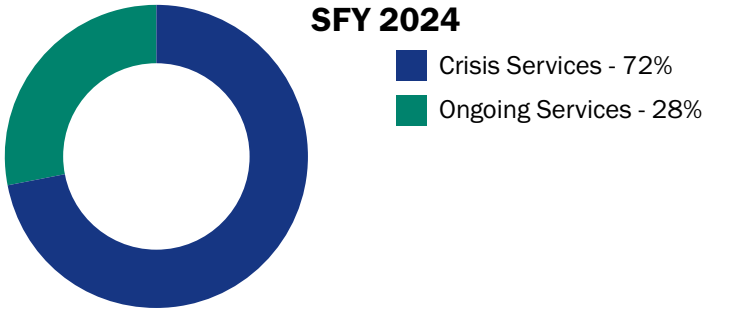
Adult Crisis centers provide emergency substance use disorder and mental health services for adults 18 and older. These centers offer a safe space for adults experiencing behavioral health crises, such as suicidal thoughts or withdrawal from drugs. All services are provided without charge, and referrals are made to appropriate community resources. Clients may remain at the facility for up to 23 hours and 59 minutes, but most receive the help they need in less time. Services include a 24-hour hotline, detox services, and crisis intervention and prevention.

# ADULT MENTAL HEALTH SERVICES

As the State Behavioral Health Authority, the Division of Behavioral Health works to ensure that Idahoans can access behavioral health care. The primary goal in providing mental health care services is to promote recovery and improve the quality of life for adults diagnosed with a serious mental illness (SMI) or a serious and persistent mental illness (SPMI). The services available to suit the diverse and complex needs of these individuals include community-based support, outpatient services, and inpatient hospitalization. While these services are provided primarily through contracts with community providers, the division has regional offices that provide court-ordered evaluations, treatment recommendations, and other treatment provisions for individuals sentenced under Idaho Codes 18-211/212 and 66-329.

The Adult Mental Health (AMH) unit, in coordination with the division's contracts unit, maintains contract deliverables related to AMH specific grants and contracts. These responsibilities include but are not limited to project scheduling, risk and change management, internal/external partner relations, vendor management, status reporting, and corrective action plans. AMH is also responsible for managing the Community Mental health Services Block Grant Application, spending, reporting, the State's relationship with its federal partner, the Substance Abuse and Mental Health Services Administration (SAMHSA) and participating in and responding to the needs of the Idaho Behavioral Health Planning Council.

**ADULTS RECEIVING MENTAL HEALTH SERVICES SFY 2024**




*During SFY 2024, 72 percent of the participants receiving services from the division received crisis services. Those who received crisis services were successfully connected to community resources. The remaining 28 percent received ongoing mental health treatment.*



## Support Services

Under the new Idaho Behavioral Health Plan, DBH has transitioned the community-based mental health support services to the new managed care provider, Magellan Healthcare, and its community provider network. These services include outreach, medication monitoring, skill-building, community-based rehabilitation, benefits assistance, and adult residential treatment services.

## Assertive Community Treatment

Assertive Community Treatment (ACT) is an evidence-based model that uses a team-based approach to provide a range of intensive community-based services to people who experience severe and persistent mental illness (SPMI) and who often have co-occurring substance use disorders. ACT teams aim to help people achieve and maintain recovery in the community, reducing the need for psychiatric hospitalization and incarceration.

ACT services are provided by a transdisciplinary team, using multi-disciplines such as a psychiatric care provider, nurse, supportive education and employment specialist, co-occurring disorder specialist, mental health professional, peer support specialist, case manager, team lead, and a program assistant. Each team member is an expert in their role, but by using the transdisciplinary approach, each team member receives cross-training in each discipline on the team.

ACT services include, but are not limited to, individualized treatment planning, crisis intervention, peer services, community-based rehabilitation, medication management, case management, individual and group therapy, co-occurring treatment, and coordination of other community support. ACT services are now offered statewide through the mental health community provider network.

The Idaho ACT Center of Excellence supports new ACT providers with ACT implementation and ongoing support through assisting the providers with implementing best practices through training, mentoring, coaching, fidelity, monitoring, and technical assistance.

## Co-occurring mental health and substance use disorders services

According to the National Survey on Drug Use and Health, in 2022, an estimated 21.5 million U.S. adults 18 or older had co-occurring mental illness and substance use disorder in the past year.

With the expansion of Medicaid in Idaho in 2020, behavioral health services for those diagnosed with co-occurring mental health and substance use disorders are now provided by Medicaid's Managed Care Organization, Magellan. Both DBH and Medicaid require that Magellan's behavioral health network includes a sufficient number of providers that are able to treat co-occurring disorders in order to meet the clinical needs of these Idahoans.

## DIVISION OF BEHAVIORAL HEALTH ADULT MENTAL HEALTH SERVICES

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Adults Served** | 11,816 | 11,803 | 9,887 | 9,749 |
| **Supportive Services (meds, housing and employment)** | 396 | 325 | 235 | 81[1] |
| **Assertive Community Treatment** | 341 | 286 | 341 | 237 |
| **Co-occurring Services** | 534 | 415 | 319 | 338 |

*[1]State Mental Health Agency client rolls continue to decrease as services are transitioned to the new Managed Care Provider, Magellan and their provider network. See supportive services section.*

# STATE HOSPITAL WEST

## CYNDEE WATERHOUSE, INTERIM ADMINISTRATOR

## 208-606-7777

State Hospital West is a licensed 16-bed adolescent psychiatric facility for youth ages 12 through 17 located in Nampa. Referrals to State Hospital West are initiated through the regional children's mental health programs throughout the state.

State Hospital West is designed to provide a safe, soothing, and calming atmosphere with ample light and views. The hospital features single occupancy rooms, classroom space, recreational therapy space, outdoor sports court, comfort rooms, and safety rooms for when patients are threatening harm to themselves or others.

State Hospital West is committed to serving youth and their families through individual and family therapy. The hospital focuses on helping youth build positive and pro-social coping skills, as well as breaking down the interpersonal barriers that can exist between youth and their caregivers. Treatment is patient-centered and facilitated by an interdisciplinary team of psychiatrists, nurse practitioners, licensed nurses, psychiatric technicians, master's level clinicians, certified recreation specialists, dietitians, and support personnel. The average length of stay is 35 days.

| State Hospital West | SFY 2022 | SFY 2023[3] | SFY 2024 |
|---|---|---|---|
| **Patient Days** | 3,149 | 1,845[1] | 2,114 |
| **Admissions** | 58 | 39 | 57 |
| **Percentage of Occupancy** | 53.9% | 31.59% | 36.01% |
| **Median Length of Stay (Days)** | 45.5 | 39 | 31.5 |
| **30-Day Readmission Rate** | 3.4% | 2.56% | 0.00% |
| **180-Day Readmission Rate** | 1.7% | 10.26% | 3.51% |
| **Cost per Patient Day** | $1,709.03 | $2,839.65[2] | $3,283.73[4] |

*[1]The decrease in patient days from FY22 to FY23 is attributed to a temporary reduction in available beds due to a construction project and incoming patients requiring extended care.*

*[2]The increase in cost per patient day is attributed to a reduced census; the fixed cost of maintaining the facility and staff is spread over fewer patients, leading to a higher cost per patient day.*

*[3]Despite the challenges passed by the construction project and reduced census, there were positive impacts on patient outcomes. The median length of stay decreased, indicating more efficient and effective patient care during SFY23, and the 30-day readmission rate also improved.*

*[4]The cost per patient day differs from what was reported in the PMR due to financial reports not being available at the time the PMR was submitted.*

# STATE HOSPITAL SOUTH

## RANDY RODRIQUEZ, ADMINISTRATOR

## 208-785-8402

State Hospital South in Blackfoot is licensed by the state to serve 110 adult patients in its psychiatric treatment facility and an additional 42 residents in the Syringa Chalet skilled nursing home. The hospital is accredited by The Joint Commission, which is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting performance standards.

Adult patients are referred to the hospital by the regional behavioral health centers after civil or competency restoration commitment from the legal system. Civilly committed patients have been found to be a danger to themselves, a danger to others, or gravely disabled. Competency restoration patients have been found unfit to proceed in the criminal justice system because of mental defect. Restoration patients require considerably more psychologist time for testing and writing reports than for the patients who are civil commitments.

Patients with increased aggression, substance use disorders, and criminal thinking and behavior require additional staff support to maintain safety, and they often require a private room, which affects the hospital's occupancy rate and admission list.

Patient-centered treatment for all hospital residents is provided by an interdisciplinary team of specialists, counselors, nurses, therapists, peers, and other support staff. During treatment, patients develop a personalized Wellness Recovery Action Plan for when they return to community living.

| SHS Adult Psychiatric Services | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Patient Days**[1] | 29,200 | 33,505 | 33,791 | 33,469 |
| **Admissions** | 666 | 604 | 645 | 633 |
| **Average Daily Census** | 80 | 91.8 | 92.6 | 91.4 |
| **Median Length of Stay (Days)** | 35 | 42 | 42 | 42 |
| **Percentage of Occupancy** | 86.2% | 83.4% | 84.20% | 83.10% |
| **30-Day Readmission Rate** | 1.5% | 0.5% | 1.20% | 1.30% |
| **180-Day Readmission Rate** | 14.0% | 11.9% | 15.50% | 15.60% |
| **Cost per Patient Day** | $636 | $665 | $769 | $782 |

| SHS Syringa Chalet Skilled Nursing | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Patient Days** | 12,023 | 13,040 | 12,912 | 13,023 |
| **Admissions** | 12 | 4 | 5 | 5 |
| **Percentage of Occupancy** | 85.1% | 85.1% | 84.20% | 84.70% |
| **Cost per Patient Day** | $863 | $719[2] | $660 | $779 |

*[1]The increase in patient days starting in FY 2022 is due to the number of adult psychiatric beds increasing from 90 to 110 beds.*

*[2]Cost per patient day decreased due to only one bond payment being due instead of the two that were due in SFY 2021.*

# STATE HOSPITAL NORTH

## TERESA SHACKELFORD, ADMINISTRATOR

## 208-476-4511

State Hospital North in Orofino is a licensed 60-bed psychiatric hospital providing inpatient treatment for adults who are committed to the Department of Health and Welfare for psychiatric treatment.

Admissions to State Hospital North are initiated by the local community and referred through the division's Clinical Services Bureau. The hospital accepts individuals committed for restoration of competency to stand trial as well as individuals committed after they are deemed a danger to themselves or to others or have a grave disability.

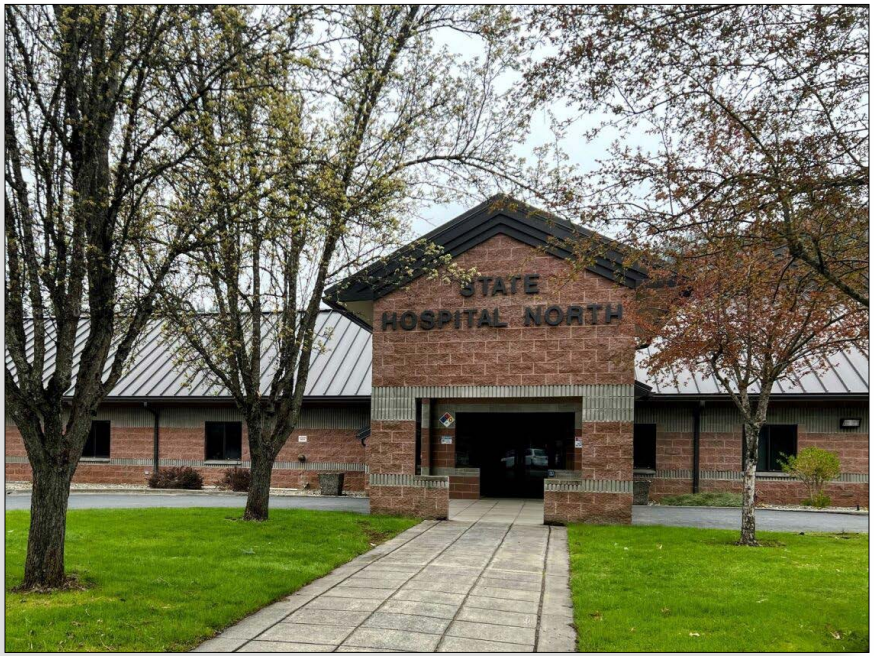
Hospitalization at State Hospital North is intended to be of short to intermediate duration, stabilizing psychiatric symptoms and assisting patients' return to their community in the shortest reasonable period. The length of stay for inpatient care is variable based on patient needs and best practices. The median length of stay for the recent year was 56 days.

Employees at the hospital deliver many specialized services and opportunities, including assessments and evaluations, medication management, individual and group therapies, community integration, recreational and educational activities, nutrition, fitness, and discharge planning. State Hospital North collaborates with patients, their families, and their outpatient treatment providers to develop targeted goals and objectives for the individual's treatment, as well as support and arrangements for follow-up care after discharge.

State Hospital North uses recovery-oriented practice and the shared decision-making model, promoting trauma-informed care individualized to reach each patient's treatment goals. Individualized care is delivered by interdisciplinary treatment teams representing psychiatry, nursing, social services, recreational therapy, dietary, and pharmacy.

| State Hospital North | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Adults Patient Days** | 18,236 | 16,564 | 15,564 | 14,202 |
| **Admissions** | 235 | 211 | 174 | 148 |
| **Avg Daily Census** | 50 | 45.4 | 42.6 | 38.8 |
| **Occupancy rate** | 83% | 76% | 71% | 65% |
| **Median Length of Stay (Days)** | 56 | 50 | 58 | 56 |
| **30-Day Readmission Rate** | <1% | 1.4% | 0.6% | 0.7% |
| **180-Day Readmission Rate** | 5.1% | 6.2% | 12.1% | 8.8% |
| **Cost Per Patient Day[1]** | $552 | $888[1] | $919 | $929 |

*[1] Price per patient day for SFY 2022 – 2024 were elevated due to increased one-time expenditures associated with preparing to attain Joint Commission accreditation, periods of low census due to COVID outbreaks, closure of one unit for Joint Commission related construction, and an ongoing staffing crisis necessitating lowered census.*



# SUBSTANCE USE DISORDER SERVICES

The Division of Behavioral Health's Substance Use Disorders (SUD) Program is primarily funded with federal dollars from the Substance Use Prevention, Treatment, and Recovery (SUPTRS) Block Grant and the State Opioid Response (SOR) grant, both administered by the Substance Abuse and Mental Health Services Administration (SAMHSA). SUD funding is used to provide SUD services for uninsured Idahoans who fall below 200 percent of federal poverty guidelines and to improve Idaho's SUD system of care through contracts with private sector providers. The goal of these services is to help participants live their lives in recovery.

**Treatment and Recovery Support Services:**

Idaho has a statewide SUD services provider network previously developed and managed by BPA Health; this work was transitioned to Idaho's new Managed Care Organization, Magellan, in July 2024. Treatment services include residential and outpatient levels of care.

Recovery support services are designated to help people access and navigate systems of care, remove barriers to recovery, stay engaged in the recovery process, and live full lives in their communities. Services include case management, life skills, recovery coaching, recovery housing, transportation, and drug testing.

2,664 clients received substance use disorder services from the division in SFY 2024.

Community-based SUD services and programs funded with SUPTRS and SOR dollars include, but are not limited to:

- Implementing specialized programs including prison/jail reentry, emergency department warm handoff programs, and start-up funds for recovery housing.
- Enhancing Idaho's recovery-oriented system of care by supporting community-based programs where more than 4,000 Idahoans have accessed recovery support.
- Increasing the statewide use of Naloxone by providing 24,870 Naloxone kits to first responders and community organizations across the state.
- Continuing to partner with local communities interested in launching Idaho Law Enforcement Diversion programs.
- Enhancing provider education on medications for opioid use disorder and safe prescribing habits by funding extensions for Community Healthcare Outcomes - opioid-specific sessions through the University of Idaho with an emphasis on training and education on treating perinatal women with opioid use disorder.
- Increasing access to Medication for Opioid Use Disorder by funding the expansion of the Office Based Opioid Treatment services in rural South-Central Idaho.

SUD funding is also used to conduct tobacco inspections, ensuring that Idaho's tobacco retailers are not selling tobacco products to people under the age of 21. DBH transfers 20% of the SUPTRS Block Grant to the Idaho Office of Drug Policy for the management and delivery of prevention services statewide.

The division continues to collaborate with an array of stakeholders to identify and implement strategic solutions for the opioid epidemic.

## CLIENTS SERVED IN SFY 2024, BY PRIMARY SUBSTANCE, FUNDED BY THE DBH SUD PROGRAM

| Primary Substance | Clients Served |
|---|---|
| **Alcohol** | 555 |
| **Benzodiazepine** | 2 |
| **Cocaine/Crack** | 11 |
| **Heroin** | 54 |
| **Inhalants** | 3 |
| **Marijuana/Hashish/THC/Cannabis** | 117 |
| **Methamphetamine/Speed** | 436 |
| **Other Amphetamines** | 8 |
| **Other Opiates/Synthetics** | 105 |
| **Other Stimulants** | 6 |
| **TOTAL** | **1279** |

*Clients' primary substance are counted one time for each of their admissions, so if they are admitted multiple times, they may have indicated multiple primary substances. However, the total line lists the number of primary substances unduplicated for each client.*

*Primary substance data is only available for clients who had an admission completed.*



## The Idaho Tobacco Project

The Idaho Tobacco Project works with retailers to prevent youth access to tobacco and electronic smoking device products. The Idaho Tobacco Project issues no-cost permits, provides retailers with educational materials, and conducts inspections to evaluate compliance with state statute (I.C 39-57), which prevents minors access to tobacco and electronic smoking devices. Effective July 1, 2022, Idaho's minimum age to purchase tobacco and electronic smoking device products was changed to 21 years of age. This change aligned Idaho's minimum age to purchase tobacco products and electronic smoking devices with the federal minimum age requirements. All tobacco and electronic smoking device retailers in Idaho are required to comply with the new minimum age requirements, and the illegal sale of these products is enforced through inspections, citations, and fines for non-compliance.

Educational materials for retailers include a monthly newsletter, point-of-sale resources (posters near cash registers or in staff areas), and online training resources (preventthesale.com/Idaho) to help retailers educate their staff.

To encourage retailers to be vigilant against selling tobacco to minors, youth-purchase inspections are conducted annually at every retail site where youth can legally enter. In 1998, the first year that statewide youth-purchase tobacco inspections were conducted, the violation rate was 56.2 percent. For calendar year 2023, the survey of inspections resulted in a violation rate of 5.77 percent. The chart below summarizes the outcome of the inspections conducted for the past four years.

### INSPECTIONS

| | CY 2020 | CY 2021 | CY 2022 | CY 2023 |
|---|---|---|---|---|
| **Permittees** | 1,598 | 1,689 | 1,681 | 1,704 |
| **Inspections** | 2,282 | 2,023 | 2,200 | 2,200 |
| **Violations** | 64 | 107 | 64 | 108 |
| **Non-Compliance Rate** | 3.40% | 6.82% | 3.65% | 5.77% |

# CHILD, YOUTH, AND FAMILY SERVICES

**MONTY PROW, DEPUTY DIRECTOR**
**208-334-1448**

**JEAN FISHER, YOUTH SAFETY & PERMANENCY**
**208-334-0641**

**LAURA DENNER, FAMILY & COMMUNITY PARTNERSHIPS**
**208-334-7233**

**ALISON TATE, EARLY LEARNING & DEVELOPMENT**
**208-334-0641**

The division formerly called Family and Community Resources (FACS) was reorganized in June 2024 into three divisions that fall under the umbrella of Child, Youth, and Family Services (CYFS). The new divisions are called Youth Safety and Permanency, Family and Community Partnerships, and Early Learning and Development. This section is based on the SFY 2024 budget and is organized using former division structure. The proposed 2025 budget adheres to the division structure.

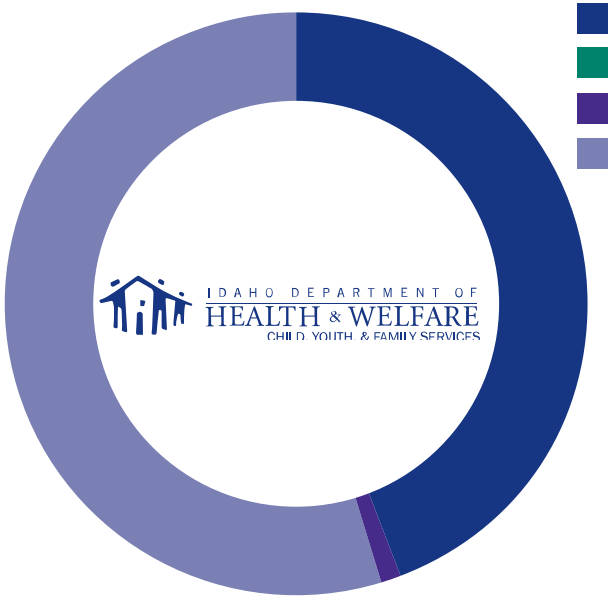
CYFS administers many programs that support Idaho families, vulnerable individuals, and children. The child protection, foster care, and adoption programs provide support for families and children experiencing abuse and neglect. Programs supporting individuals with developmental disabilities or delays include the Children's Developmental Disability Program, the Infant Toddler Program, the Southwest Idaho Treatment Center, and the Crisis Prevention and Court Services Program.

## SFY 2024 HIGHLIGHTS

### Payette Assessment Care Center (PACC)

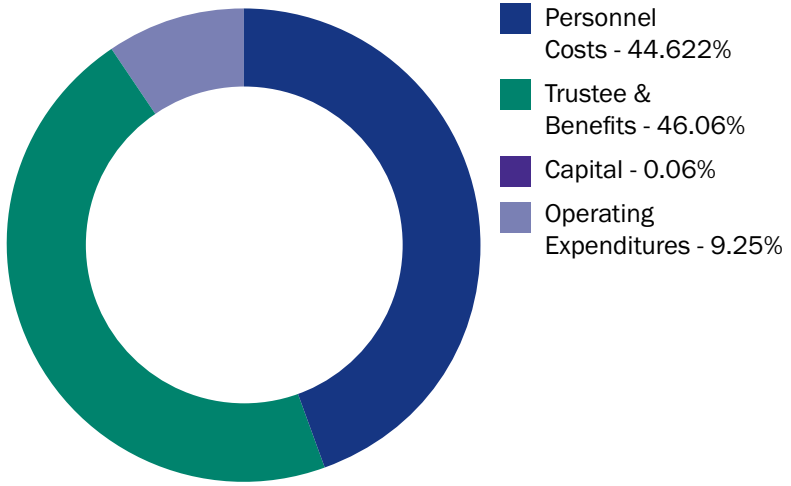
The Payette Assessment Care Center opened in May 2024 and is designed to serve as a temporary homelike setting for foster youth until a placement in a foster home or residential treatment is located. The center allows the department to keep siblings together while providing a stable living situation.

### SFY 2025 FUNDING SOURCES

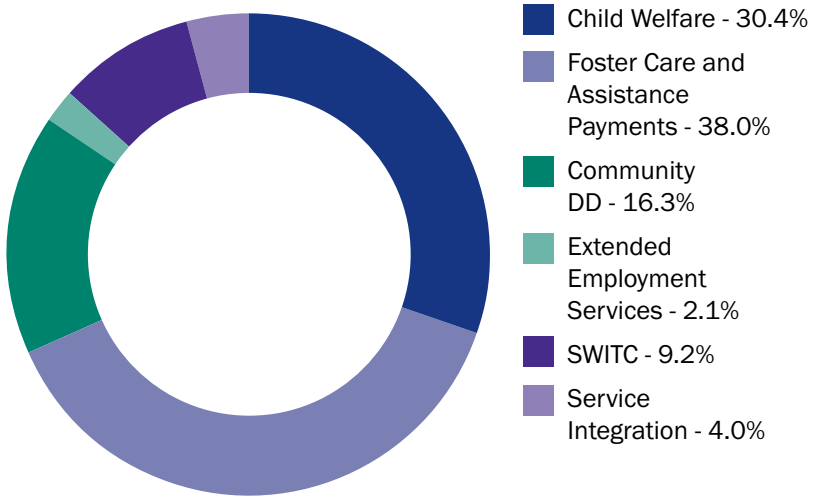



*Authorized FTP: 654.76; Original appropriation for SFY 2024: general funds $73,264,200, total funds $165,404,000; 3.03% of DHW funding.*

### SFY 2025 EXPENDITURE CATEGORIES



## SFY 2025 APPROPRIATION BY PROGRAM


Child Welfare - 30.4%
Foster Care and Assistance Payments - 38.0%
Community DD - 16.3%
Extended Employment Services - 2.1%
SWITC - 9.2%
Service Integration - 4.0%

### Crisis System Improvement Project (CSIP)

During SFY 2024, the CSIP created a pilot Systemic, Therapeutic, Assessment, Resources, and Treatment (START) clinical team to further efforts toward certification in Idaho. They've enrolled children and adults from both Canyon and Ada County to receive START services. START offers a high quality, evidence-based, nationally recognized model of cross-system crisis prevention and intervention services for individuals 6 and older with developmental disabilities and mental health needs. Achieving a national certification will improve the department's ability to prevent emerging crises for adults and children with dual diagnoses. START certification is a four-year process.

SFY 2024 saw the completion of the demolition of unusable buildings and the beginning of the building design process for new construction on SWITC campus. A new Assessment Observation and Stabilization Unit and Step-Down Housing is scheduled to be fully constructed by December of 2026. The goal is transitioning clients back to the community.

# SERVICE INTEGRATION

The 2-1-1 Idaho CareLine and Navigation programs connect individuals and families with significant needs to resources and supports.

### 2-1-1 Idaho CareLine

The 2-1-1 Idaho CareLine is a statewide, bilingual, toll-free information and referral service linking Idaho residents to health and human services. The Idaho CareLine has been the state's 2-1-1 call center since 2002.

In SFY 2024, the Idaho CareLine participated in community outreach events and promoted various DHW and community campaigns designed to increase the health, stability, and safety of Idahoans. Some of the recent partnerships with campaigns include how to become a foster parent and supporting the ease and accessibility of substance use disorder treatment and recovery services. The Idaho CareLine continues to partner with United Way and findhelpidaho on providing information and referral resources to Idahoans.

The Idaho CareLine facilitated 90,190 information contacts (through calls, texts, and e-mails) and provided 116,719 individual referrals. CareLine's referral database currently has 10,401 active services relating to 3,305 programs.

CareLine's resources are accessed by dialing 2-1-1 from a phone number with an Idaho area code or 800-926-2588. Agents assist callers from 8 a.m. to 6 p.m. MT Monday through Friday. Idahoans also can access resources through https://211.idaho.gov/ or by texting a ZIP code to CareLine at TXT211.

### Resource and Service Navigation

Resource and Service Navigation identifies and develops resources to support families that are struggling. Families work with navigators to achieve long-term stability by partnering to develop customized service plans focused on family strengths and community supports. Navigators work with individuals, children, and families for up to 120 days to help them achieve long-term stability, well-being, health, and safety.

During SFY 2024, the program received 7,138 referrals and provided case management and helped identify needed resources and services to 4,690 households. This is over a 34% increase in referrals from ones received in the previous SFY. Navigation services distributed $1,667,428 in emergency assistance and career enhancement support, while leveraging community funds on behalf of families in Idaho.

Idaho received a fifth round of a federal kinship navigation grant to further enhance program services. The goal is to identify kinship families and provide individualized supports to prevent children from entering formal foster care by supporting placements that promote family stability, safety, and well-being. Kinship care is the practice in which relatives or a significant adult in the life of a child take on the role of parenting when a child's parents are unable to care for them.

After competing with applicants across the country, Idaho has been awarded a unique opportunity to envision and create a statewide approach to supporting grandparents and other kin and the children they raise. The Grandfamilies & Kinship Support Network, the nation's first and only federally funded technical assistance center on these families, will provide in-depth assistance for two years to help Idaho's government agencies and nonprofit organizations work together to break down silos and holistically support kinship families and their unique needs.

In addition to emergency assistance and career enhancement, Navigation received $60,000 from Casey Family Programs to serve kinship families and families that don't have established citizenship. In 2022, a total of 12,063 grandparents in Idaho were responsible for their grandchildren younger than age 18. Navigators work in communities across the state enhancing resources and support for kinship families in Idaho.

## CHILD AND FAMILY SERVICES

Child and Family Services' primary commitment and responsibility is the safety, well-being, and permanency of children who are victims of child abuse, neglect, or abandonment. Services and supports are provided to children and families to address and meet needs related to safety, well-being, and permanency through child protection, in their homes, and through foster care. The program also licenses families to care for foster children, provides independent living services for youth transitioning from foster care to adulthood, and manages the Interstate Compact on the Placement of Children. Additionally, the program monitors and assures compliance with state and federal program and funding requirements including the Indian Child Welfare Act and the Interstate Compact on the Placement of Children.

Services reflect a family-centered philosophy that affirms the belief that families should be treated with respect, involved in decisions, and when safe are the best place for children to grow and develop. This approach is reflected in work with families and is supported by federal and state law and policies that place a high priority on family unity, involvement, and privacy.

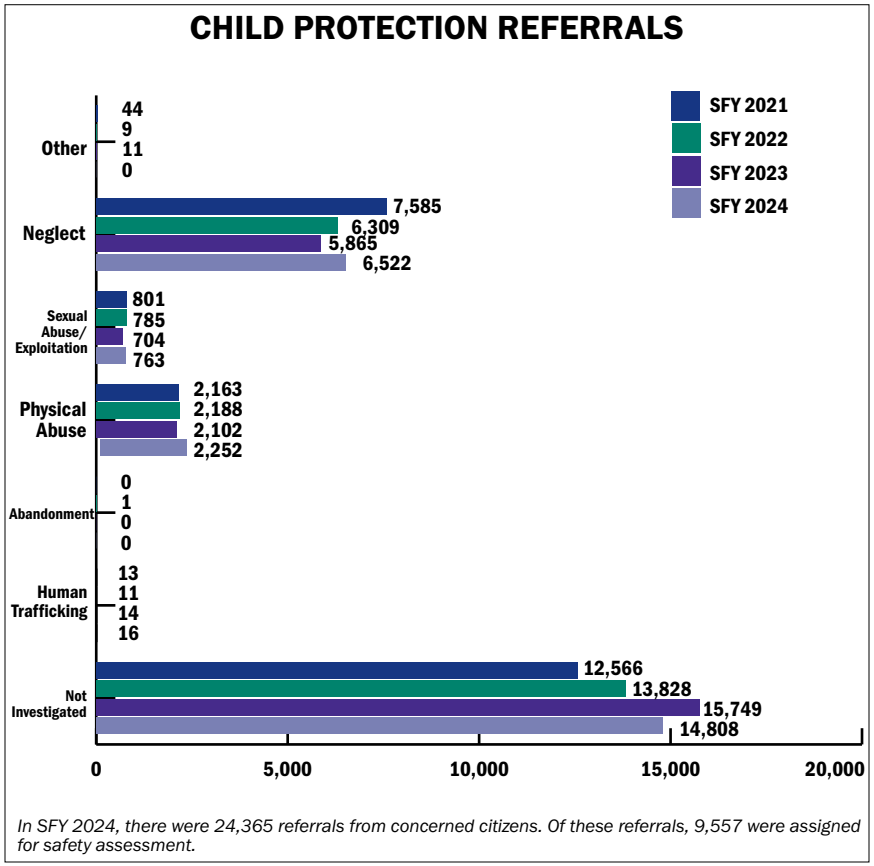
Child and Family Services (CFS) program responsibilities fall into four general categories:

1. Receiving reports of abuse or neglect
2. Assessing allegations of abuse and neglect
3. Providing ongoing case management services to children (in-home or out-of-home placements)
4. Ensuring children have safety and permanency in their own homes or other permanent homes

## Child Protection

The CFS program operates a centralized unit to process all child protection referrals. The primary responsibility of this unit is to receive and document reports of child protection concerns from the public. The unit uses program policies to determine which reports meet criteria for staff to respond to. For those reports, staff will complete a safety assessment to ensure child safety and determine whether the child and family need services to address the identified safety concerns. Whenever possible, staff and families work together to ensure the child's safety in their homes.

If safety cannot be managed at home, the child may be removed by law enforcement or a court order. When children are removed from their homes, staff continue to work with the families to return the children to the home as soon as it is safe to do so.




*In SFY 2024, there were 24,365 referrals from concerned citizens. Of these referrals, 9,557 were assigned for safety assessment.*

## Foster Care

Foster care is a critical component of the program's services. Resource families provide care for children who have experienced maltreatment and who cannot be maintained safely in their own homes.

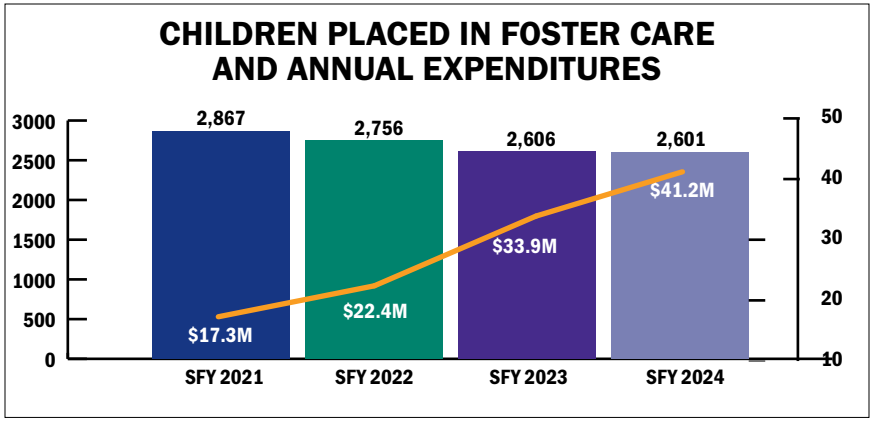
During SFY 2024, a total of 2,601 children were served through the foster care program. In the same year, 1,164 children left foster care. Of these children, 66 percent were reunified with their parents/caregivers.

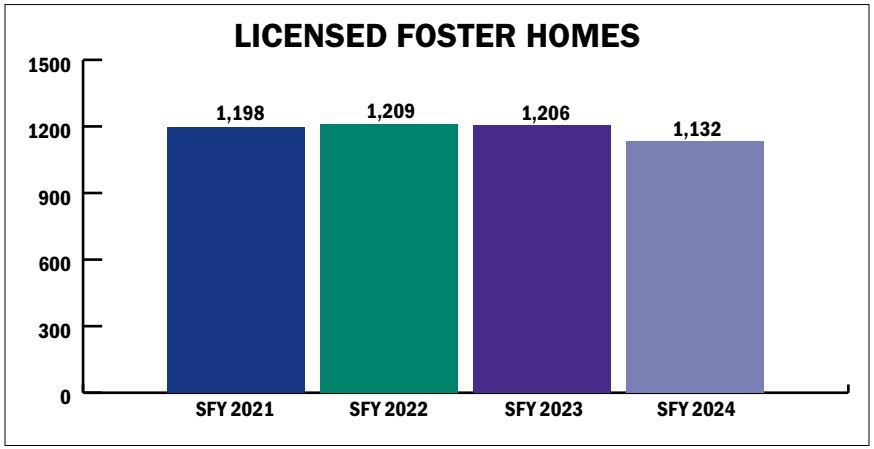
Whenever possible, relatives of foster children are considered as a placement resource and may be licensed as resource parents. Relatives can be important supports to the child, the child's parents, and the resource family.

Child and Family Services manages out-of-home placements to:

- Assure the child will be safe
- Provide services to the family and the child to promote reunion with biological parents if possible and reduce long-term negative effects of the separation
- Allow for continued connection between the child, their family, and the community

Knowledgeable and skilled resource families and other care providers are critical to providing quality services to children placed outside their family homes. Licensing processes and requirements are designed to assess the suitability of families to safely care for children. When a child's family is unable to make changes that assure a child's safety, the resource family may become a permanent placement for a child. On June 30, 2024, there were a total of 1,132 licensed resource families in Idaho and out-of-state, where children were placed through the Interstate Compact on the Placement of Children (ICPC).




## Independent Living

Idaho's Independent Living Program assists foster youth in their transition to adulthood. Supports and services for life skills and personal needs, education, employment, housing, cultural identity formation, supportive relationships and community connections, physical and mental health, transition planning, and establishing permanent connections are funded through this program.

In SFY 2024, the Independent Living Program served 754 youth and young adults. In addition to these services, American Rescue Plan funds were used by the program to provide for individualized needs including education, housing, and transportation. To help foster youth transition to adulthood and provide educational opportunities, the Education and Training Voucher Program can provide up to $5,000 per year. The voucher is available to youth who have been in foster care after the age of 16 and have received a high school diploma or GED.

Older youth often experience barriers to success after leaving foster care. In partnership with the Administration for Children and Families, Idaho collects service and outcome information about and from youth for several years after they leave foster care through the National Youth in Transition Database.

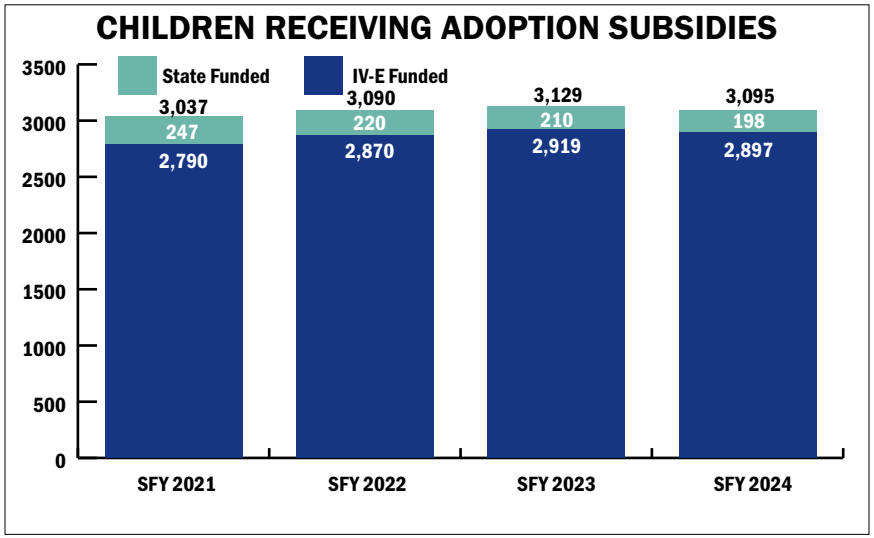
## Adoption

Child and Family Services provides adoption services for children in foster care whose parents' rights have been terminated by court order. Most Idaho children adopted from foster care have special needs. They may have physical, mental, emotional, or medical disabilities, or they may be part of a group of siblings who should stay together. Some children may be older but still need a permanent home through adoption.

The department's goal is to find a family who can best meet a child's needs within 24 months of when the child enters foster care. To help meet this goal, the department looks for relatives who are interested and able to adopt the child. When no relatives are available or if placement with a relative is not in the child's best interest, non-relative foster families often adopt.

Families who adopt children with special needs are eligible to apply for federal or state adoption assistance benefits. These benefits help subsidize the expenses associated with finalizing an adoption and the cost of parenting a child who has special needs.

In SFY 2024, a total of 304 children were adopted from foster care. The Department of Health and Welfare and the courts work closely together to improve monitoring and processes to reduce delays and help children have safe, caring, and permanent families.




### ADOPTIONS FINALIZED

| SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|
| 388 | 309 | 260 | 304 |

### AVERAGE MONTHLY ADOPTION ASSISTANCE PAYMENTS

| SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|
| $398 | $416 | $491 | $526 |



# DEVELOPMENTAL DISABILITIES SERVICES

The Developmental Disabilities Services programs manage and deliver services for people of all ages who have developmental disabilities. Through community partnerships, the program has service choices available for individuals and their families, allowing them to strive for self-direction and full participation in their communities.

## Infant Toddler Program

Idaho's Infant Toddler Program (ITP) coordinates a system of early intervention services to assist families and children from birth to 3 years of age who have a developmental delay, disability, or an established medical condition. The program promotes parent coaching to build capacity and provide services and supports to enhance global development of young children's language, physical, cognitive, adaptive, and social-emotional development needs. Services are provided through private insurance, Medicaid, and federal and state funds at no direct cost to families.

Services occur in the child's natural environment and can include service coordination, developmental therapy, speech therapy, physical therapy, occupational therapy, and family education.

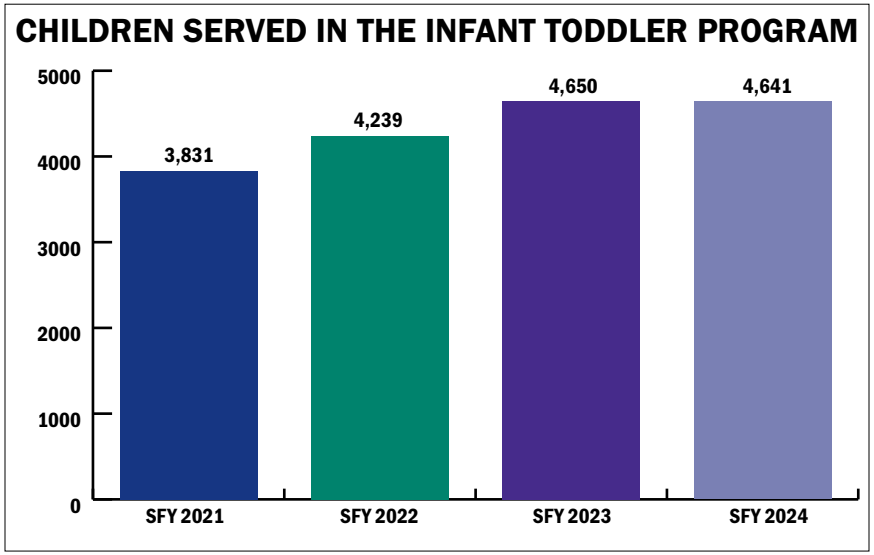
Children are served for a variety of reasons including diagnosable conditions that result in delays or disabilities. In SFY24, 9.8% of children referred for evaluation have been involved in substantiated cases of neglect or abuse; 27.4% of children receiving early intervention services were born prematurely.

In SFY 2024, the program received 4,885 referrals for services, and 4,641 children and their families' received services.

Based on FFY22 program data, the Infant Toddler Program received a federal determination rating of "Needs Assistance" from the Office of Special Education. Idaho's determination was impacted by long standing non-compliance related to providing

timely services.

The Infant Toddler Program also continues its effort to increase the number of Certified Autism Specialists and Infant and Early Childhood Mental Health Specialists in the program.




## Crisis Prevention and Court Services Team

The Crisis Prevention and Court Services Team (CPCS) provides information, training, and clinical consultation to individuals who support persons with disabilities who are at risk of losing their community placement due to a behavioral, mental health, or medical crisis. CPCS's goal is to help the person remain in their current community placement. When that isn't possible, CPCS works with the person's team to help locate other community placement options that can meet the person's needs. Upon exhausting community placement options, a referral may be made to Southwest Idaho Treatment Center.

CPCS also provides court-ordered evaluations to address criminal competency, civil commitment, and guardianship and/or conservatorship.

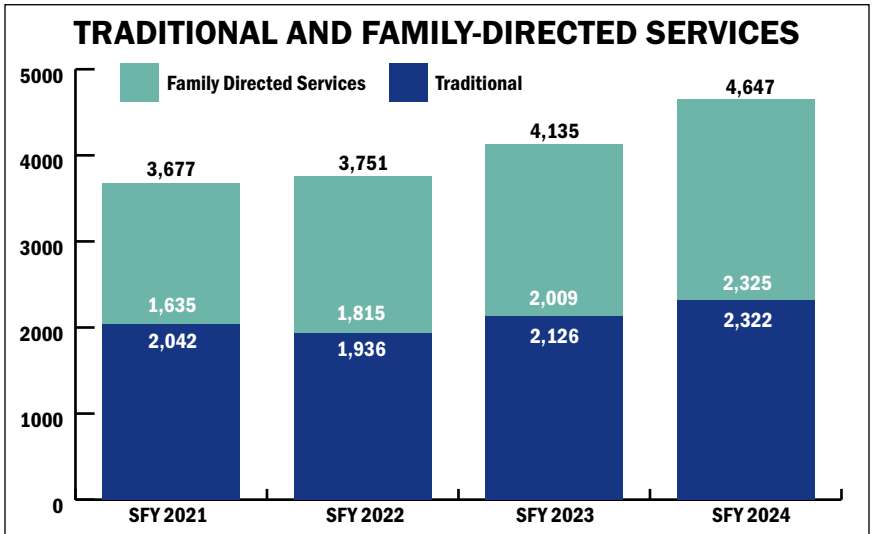
## Children's Developmental Disabilities Services

The Children's Developmental Disabilities program manages services and supports for children with intellectual disabilities and their families. The program provides traditional, family directed services options, as well as case management.

Traditional services and supports help children maintain or improve their skills and knowledge in many areas. Providers of these services can be individuals or private companies. They must qualify to deliver the services and supports and must be enrolled as Medicaid providers.

The family directed services option provides flexibility by allowing families to choose the support their child receives and who provides it.

The program also offers family-centered case management. Case managers help families determine their child's needs and link them to services. Case managers also monitor the services and supports children receive.




*The change in numbers from FY2020-2021 were result of redesigned service packages. July 2019 DD waivers were discontinued and services shifted to state plan amendment services. New State plan services were Implemented for Intervention services and Intervention services were therefore removed from services being calculated in these numbers. Case Management is now offered for these children who are accessing Intervention services. Preadmission assistance is available to families seeking services.*

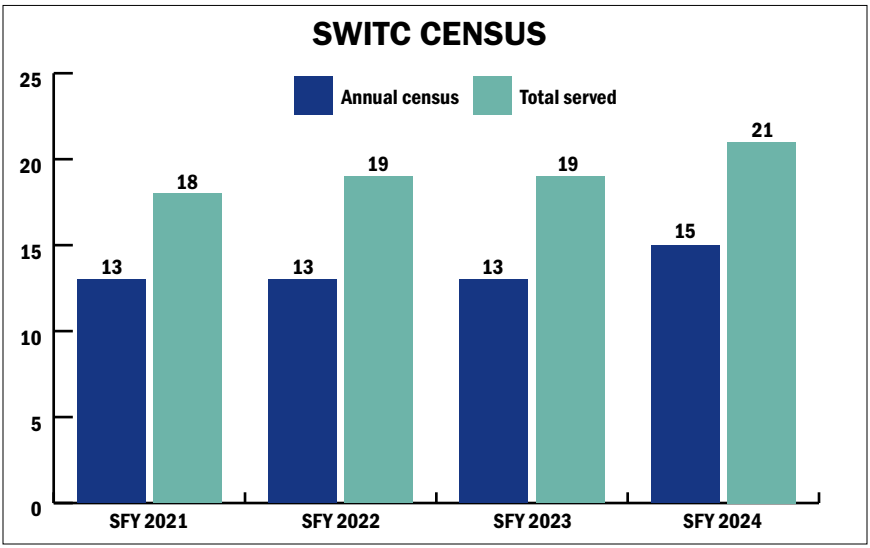
# SOUTHWEST IDAHO TREATMENT CENTER

## JAMIE NEWTON, ADMINISTRATOR

## 208-475-2434

The mission of Southwest Idaho Treatment Center (SWITC) in Nampa is to provide services as a short-term therapeutic stabilization and transition center for clients, focused mostly on those who have criminal activity or severe behaviors. SWITC has become a stabilization center for individuals with intricate and challenging needs, with the goal of transitioning them to effective community placements for long-term services as quickly as possible.

The combined efforts of the Crisis Prevention and Court Services Team in maintaining community placements and of SWITC is systematically supporting people as they move back into their communities. Overall, this has resulted in a continued low census at the facility.



# INDIRECT SUPPORT SERVICES

Indirect Support Services provides the vision, management, and technical support to carry out the department's mission. Indirect Support includes the Office of the Director, Financial Services, Management Services, Information Technology, the Bureau of Legislative and Regulatory Affairs, and the Office of Communications.

**The Office of the Director** oversees the entire department, working with the Governor's Office and the Idaho Legislature to effectively and economically implement policy direction for services and programs. Read more about the Director's Office on page 12.

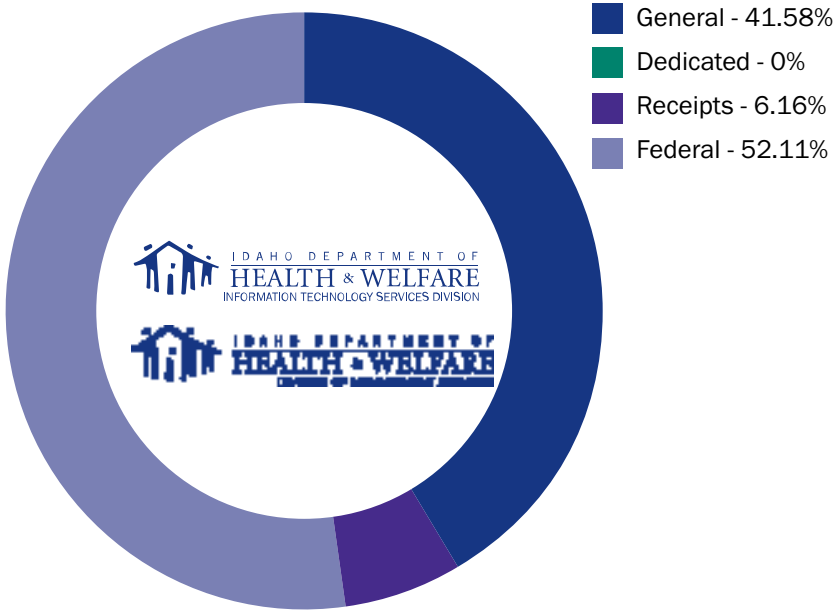
**Management Services** provides administrative and financial support for the department and oversees the department's facilities, purchasing, and compliance activities.

**Financial Services** manages the department's budget, cash flow, and physical assets, and oversees accounting and financial reporting.

**Information Technology** provides automated and computer support for delivery of services, along with hardware, software, and networking support across the state.

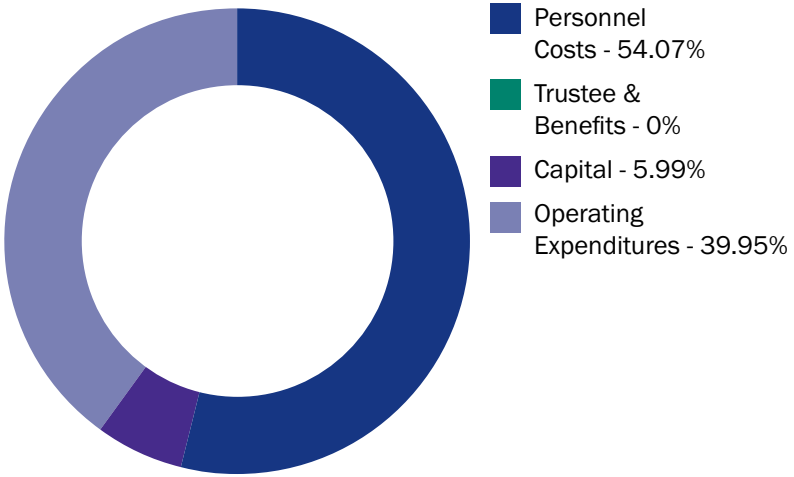
**The Office of Communications and Customer Experience** provide internal and external communication support for the department across all 11 of its divisions, serve as a liaison for the media, and provide oversight and support of privacy, client civil rights and language access programs.

## SFY 2025 FUNDING SOURCES

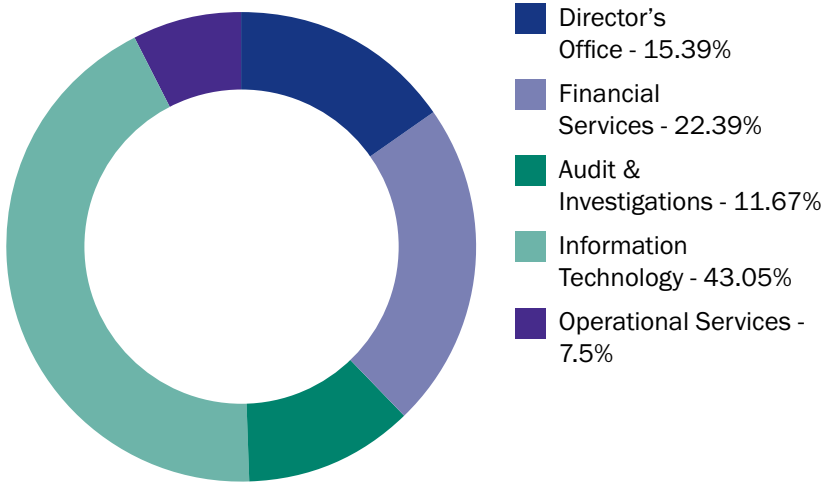



*Authorized FTP: 259.60; Original appropriation for SFY 2024: general funds $23,287,800, total funds $56,003,700; 1.03% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES




## SFY 2025 APPROPRIATION BY PROGRAM


Director's Office - 15.39%
Financial Services - 22.39%
Audit & Investigations - 11.67%
Information Technology - 43.05%
Operational Services - 7.5%

# DIVISION OF MANAGEMENT SERVICES

**STACI PHELAN, DIVISION ADMINISTRATOR**

**208-334-0632**

The Division of Management Services is dedicated to promoting the department mission of strengthening the health, safety, and independence of Idahoans by delivering support across the department and assisting the department's partners, stakeholders, and customers. The division manages the details of finance, resources, and compliance to ensure effective, efficient business operations and sound infrastructure for the department. The division works behind the scenes as an extension of department teams and partners to implement services smoothly and effectively. The division's aim is to remove barriers for the department and its teams for the benefit of all Idahoans.

In 2024, to align with strategic goals of the department, the Division of Management Services underwent these organizational changes:

- Facilities and Business Operations is now the Bureau of Operations
- Background Check Unit moved from the Bureau of Compliance to the new Bureau of Operations
- New Communications Team was formed
- Contracts and Procurement Services moved from the Bureau of Financial Services to the Bureau of Compliance.
- Bureau of Financial Services is  the Division of Financial Services, effective in SFY 2025.

# SFY 2024 HIGHLIGHTS

Last year, the Division of Management Services served Idahoans by:

**Strengthening trust and confidence in the Department of Health and Welfare**

The new division Strategic Plan is a step in moving toward an emphasis on metric tracking and data-driven decision making. The division also achieved objectives aligned with the DHW Strategic Plan:

*Enhance public health and safety by improving the effectiveness and visibility of regulatory burden*

- *Grant Training:* DMS held an annual two-day training intended to educate staff on topics including grant management, internal controls, record retention requirements, cash management, allowable costs, contract and sub-recipient monitoring and risk assessments, and compliance preparation, responsibility and awareness. Keynote speakers within DMS and other DHW divisions delivered engaging speeches and presentations tailored to their subject matter expertise. This training is now mandatory for all staff with grant and audit responsibilities to stay in compliance with state and federal regulations and to secure and sustain funds used as intended for both ongoing and upcoming programs.
- *Background Check System:* The Background Check Unit strategically leveraged federal grant funding to implement this new system in October 2023 to optimize operations and improve the efficiency of background checks. The primary goal is to significantly reduce processing times to provide a faster, more seamless experience for both applicants and employers.

*Mature resource management strategies through updating resource management tools*

- *Central Policy Repository*—Launched in March 2024, the repository was developed to improve access to all department, division, and institution policies. Created in collaboration with project sponsors, policy leads from each division and institution, and Laserfiche experts, the repository enhances the accessibility and organization of policies across the department.
- *Luma*—the statewide modernization of the ERP (enterprise resource planning) system went live on July 1, 2023 and replaced essential systems and software that the department uses for financial operations, human resources operations, contracting and procurement, reporting, and more. DMS teams were integral to the implementation of the Luma project and assisting the department in both training and using the new system was a large part of our work in 2024.



# BUREAU OF OPERATIONS

The Bureau of Operations includes the Background Check Unit and Facilities. The Facilities team manages and maintains physical spaces and resources to provide a safe and functional infrastructure to DHW staff and customers.

**The Facilities team** provides the following support to DHW's 38 locations:

- **Regional facilities and business operations:**
  - **North HUB:** Ponderay, St. Marie's, Kellogg, Coeur d'Alene, Moscow, Lewiston, Orofino, and Grangeville
  - **West HUB:** Payette, Caldwell, Boise, McCall, and Mountain Home
  - **East HUB:** Burley, Pocatello, Idaho Falls, Twin Falls, Blackfoot, Rexburg, and Salmon
- **Building management:** Manages the operation, planning, care, and repair of all regional buildings. Prepares and submits DHW's annual capital, alteration, and repair budget request; the annual five-year facilities plan; and agency project requests for legislative funding. Monitors, negotiates, and coordinates leases for 27 buildings. Coordinates and files facilities related insurance claims. Assists with disposal of assets.
- **Construction projects:** Coordinates and manages all statewide construction projects with a value exceeding $10,000.
- **Motor pool:** Administers motor pool vehicle purchases, statewide allocation, repair, and maintenance for more than 400 vehicles.
- **Security:** Oversees security contracts for DHW buildings and assists with assessing and managing security threats and safety concerns.

### The Background Check Unit

The Background Check Unit conducts department-required criminal history background checks. This fingerprint-based search includes results from national and state criminal databases and jurisdictions. The background check also includes searches of specific registries including state and national sex offender registries, Medicaid and Medicare Excluded Provider listings, Child and Adult Protection registries, the Idaho Nurse Assistant Registry, and Idaho driving records.

The department's background check is completed for applicants who work with 1,900+ agencies providing care or services to children or vulnerable adults. Learn more at the Background Check Unit's website, https://healthandwelfare.idaho.gov/bcu.

### Plans and Programs

Project management staff, reporting to the division administrator, coordinates projects and plans such as development of the annual Performance Report and the Continuity of Operations Plan (COOP). The COOP is an essential plan for the department that details department strategies for dealing with a wide range of emergencies, including localized acts of nature, accidents, technological or attack-related emergencies, and pandemics. The COOP is reviewed and updated biennially by a Continuity Working Group (CWG) comprised of representatives from each division in the department. The CWG is responsible for the identification of the department's essential functions.

Project management also provides administrative support for the department's strategic plan, which sets specific, measurable goals to guide the department toward its mission. These staff are responsible for facilitating strategic plan accountability quarterly meetings, when DHW leaders discuss progress, setbacks, and milestones, as the department works toward meeting its strategic targets. Having a team that administers the strategic planning process frees up department leaders and subject matter experts to focus on implementing strategic initiatives.

### DMS Communications

Established in December 2023, the DMS Communications Team is responsible for creating, editing, and distributing various communications within DMS, DHW and external stakeholders. The team focuses on producing clear, consistent, and effective content while also developing strategies and timelines to ensure timely and efficient delivery to the appropriate audiences.

## BUREAU OF COMPLIANCE

The Bureau of Compliance endeavors to provide a true compliance culture of safety, integrity, and ethical behavior across the department. The units within the Bureau of Compliance perform functions in prevention and detection to protect the state's vulnerable populations. Each unit relies on specialized expertise to conduct reviews and make recommendations regarding department resources. These efforts help validate that department work and programs are implemented effectively and efficiently within regulatory and legislative requirements. The units within the Bureau of Compliance include Contracts and Procurement Services, Internal Audit,and Welfare Fraud Integrity. The Office of Program Integrity will be joining the Bureau of Compliance soon!

Formerly, the Criminal History Unit, Medicaid Program Integrity, and Data Analytics, all were aligned under the Bureau of Compliance. The Criminal History Unit, now known as the Background Check Unit, has been realigned under the Bureau of Operations in 2024. The Medicaid Program Integrity and Data Analytics units will be realigned under the Division of Medicaid in SFY 2025.

### Contracting and Procurement Services

- **Procurement services:** The contracting and procurement services team is responsible for procuring services and products on behalf of programs and employees, in support of department needs. All procurement activities are conducted in accordance with the State Procurement Act, and the department coordinates with the Department of Administration's Division of Purchasing for procurements of significant complexity or with a total value above $5 million.
- **Bidding and contract services:** The contracting and procurement services team provides technical expertise and administrative oversight of department competitive bidding, contract and subgrant development and implementation, and product purchases. There were approximately 2,000 active contracts and subgrants department-wide on June 30, 2024, with a total value of approximately $2.7 billion. Additionally, there were approximately 685 direct purchase orders for commodities and goods produced in SFY 2024.
- **Contract and purchasing repositories:** The team develops and maintains the department's contract and purchasing repositories, which is the system where all contracts and subgrants are generated, and scanned images are stored.
- **Contracts and purchasing policy:** The team develops and maintains contracts and purchasing policy, procedure, and guidance documentation, in accordance with the State Procurement Act.
- **Contract management:** The team provides contract administration, monitoring, and contract training for department staff, in collaboration with the Department of Administration, to ensure compliance with purchasing rules and regulations.

### Data Analysis

This unit, moving to Medicaid in 2025, provides data analysis support for the Bureau of Audits and Investigations. Data mining is used to find hidden patterns of waste, fraud, and abuse in client eligibility data, benefit issuances, and provider billings and claims. Statistical analysis can also be used to identify and prioritize cases for investigation.

### Internal Audit

This unit provides independent appraisals of the department's various operations and systems of control. It helps the department accomplish its objectives by bringing a systematic, disciplined approach to evaluation, and it improves the effectiveness of risk management, control, and governance processes. Internal auditing assists department staff by furnishing them with analyses, appraisals, recommendations, counsel, and information and by promoting effective control at reasonable costs.

### Medicaid Program Integrity

This unit, moving to Medicaid in FY 2025, investigates allegations of Medicaid fraud, waste, and abuse, and conducts federally mandated program reviews and investigations by reviewing provider billing practices and records.

Medicaid investigations are initiated from:

- Data mining and other proactive reviews
- Referrals from other agencies
- Provider self-reporting
- Complaints

Issues are resolved through:

- Education
- Policy recommendations
- Recoupment of overpayments
- Assessment of civil monetary penalties
- Termination of provider agreements
- Exclusion from the Medicaid program
- Referral for prosecution

### Welfare Fraud Investigations

This unit investigates allegations of recipient fraud in welfare benefits that include Supplemental Nutrition Assistance Program (SNAP – Food Stamps), cash assistance (TAFI), Medicaid, and Idaho childcare assistance (ICCP).

This unit also investigates allegations of provider fraud among Food Stamp Retailers and ICCP childcare providers.

Investigators work with program staff, local law enforcement, Office of the Inspector General, and county prosecutors in every region of the state to investigate allegations. Investigators pursue appropriate actions on cases which may result in administrative disqualifications or criminal prosecutions. In 2024, from 54 fact-finding cases, $954,326 was investigated in criminal and civil fraud. The value of completed cases where fraud was identified was $648,184.

## DIVISION OF FINANCIAL SERVICES

The Division of Financial Services works closely with all divisions within the department, providing guidance and support to ensure resources are managed responsibly. Division staff also work closely with the State Controller's Office as key stakeholders in the Luma system; staff were critical contributors to the Luma team as the project progressed through the go-live date July 1, 2023. Their work ensures the new interface meets the Department's business requirements.

The Division of Financial Services includes Financial Management; Financial Policy, Reporting, and Reconciliation; Financial Systems Support; Accounts Payable; Employee Services; Electronic Benefits (EBT); Revenue Operations; Grant Reporting; and Cash Management; and Contracting and Procurement Services (CAPS) until SFY24 when that unit moved to the Bureau of Compliance.

## Financial Management

The Financial Management team is responsible for:

- **Cost allocation and federal grant management:** Facilitates recovery of indirect costs incurred by the department in support of federal programs, through operation of a federally approved cost allocation plan. This includes quarterly updates to the plan narrative, statistics, and processes to maintain compliance with changes in federal regulations and to account for changes in DHW organizational and program structures.
- **Budget request:** Preparing and submitting the department's annual budget request to the Division of Financial Management and Legislative Services Office
- **Funding distribution:** Distributing appropriated funding to more than 2,500 operating budgets within the department
- **Allocated funding:** Monitoring program expenditure trends to allocated funding
- **Analysis and reporting:** Preparing financial analysis and reporting for division and executive management
- **FTE position monitoring:** Monitoring established full-time equivalency positions vs. the number of full-time equivalency positions authorized by the legislature
- **Research:** Researching and compiling historical expenditure and revenue information

## Financial Policy, Reporting, & Reconciliation

The Financial Policy, Reporting, and Reconciliation team provides critical oversight, monitoring, and control functions to support DHW's financial operations.

Daily, monthly, quarterly, and annual financial reconciliations are performed by this unit. The team is also responsible for annual comprehensive financial reporting (ACFR), administration of financial policies, and management of business initiatives such as the P-Card and Electronic Benefits Transfer (EBT) Program. The priority for this unit is the methodical, continuous evaluation and intervention in financial operations to maintain compliance with Generally Accepted Accounting Principles (GAAP)/ Governmental Accounting Standards Board (GASB) standards and ensure adherence to applicable rules, laws, regulations, and best practices.

This team's responsibilities include:

- **Financial reporting:** Developing and submitting the DHW Annual Comprehensive Financial Report (ACFR) closing packages to the State Controller's Office for inclusion in the State ACFR
- **Reconciliation:** Financial reconciliation activities
- **Financial policy:** Updating and communicating financial policies, in compliance with state and federal policy
- **Financial report development:** Report development and analysis. The team develops both one-time and ongoing reports in the data warehouse that are often scheduled for delivery to individuals.
- **Financial compliance communication:** Developing training, documentation, and communication strategies for financial operations

## FINANCIAL SYSTEMS SUPPORT

The Financial Systems Support Unit oversees automated accounting systems used by DHW. These systems are used for record keeping, budgeting, and financial reporting of information collected from all divisions within the department. Support activities include design, testing, troubleshooting, and monitoring program systems and interfaces, and providing help desk support for related accounting functions. The unit supports the Luma Enterprise Resource Planning system and associated interfaces and ancillary modules:

- **Payables Interfaces:** Medicaid, childcare, child support, foster care, energy assistance, job services payment systems, and vendor management support
- **eSiviCap:** the Statewide module implemented to process indirect expenditures in support of DHW's federally approved cost allocation plan

### Accounts Payable

This team supports statewide DHW accounts payable activities. This unit is responsible for:

- Processing vendor invoice audit/payments
- Editing vendor profiles
- Processing warrant issues such as stop payments, forgeries, cancellations, and reissues
- Making rotary fund payments
- Processing interagency payments
- Providing payables Help Desk phone support
- Assisting staff with Navision research
- Supporting Electronic Benefit Transfer (EBT) payments
- Processing direct FISCAL entries (Trust payments, adjustments, CRU refunds)

### Employee Services

This unit handles all employee documents relating to insurance, compensation and payroll deductions, and provides consultation to field offices. The team is also responsible for:

- **Payroll system:** Payroll and personnel operations transitioned to Luma
- **Payroll support for staff:** Provides payroll support for regional, institutional, and Central Office personnel
- **Payroll time entry verification:** Verifies online time entry for all staff to ensure accurate and timely employee compensation
- **Personnel support:** Historically, Employee Services has provided validation and entry of information for new hires, terminations, transfers, and payroll deductions such as health insurance and pension to ensure data integrity. Due to the implementation of the Luma system, these duties and responsibilities transitioned to the HR team in October 2023.
- **Personnel records:** Maintains and safeguards employee personnel records. Due to the implementation of the Luma system, these duties and responsibilities transitioned to the HR team in October 2023.

### Electronic Benefit Transfer (EBT)

The Electronic Benefits Transfer unit is responsible for implementation, development, and daily operation of the Electronic Benefits Transfer (EBT), Direct Payment Card (DPC), and Electronic Payment System (EPS) activities.

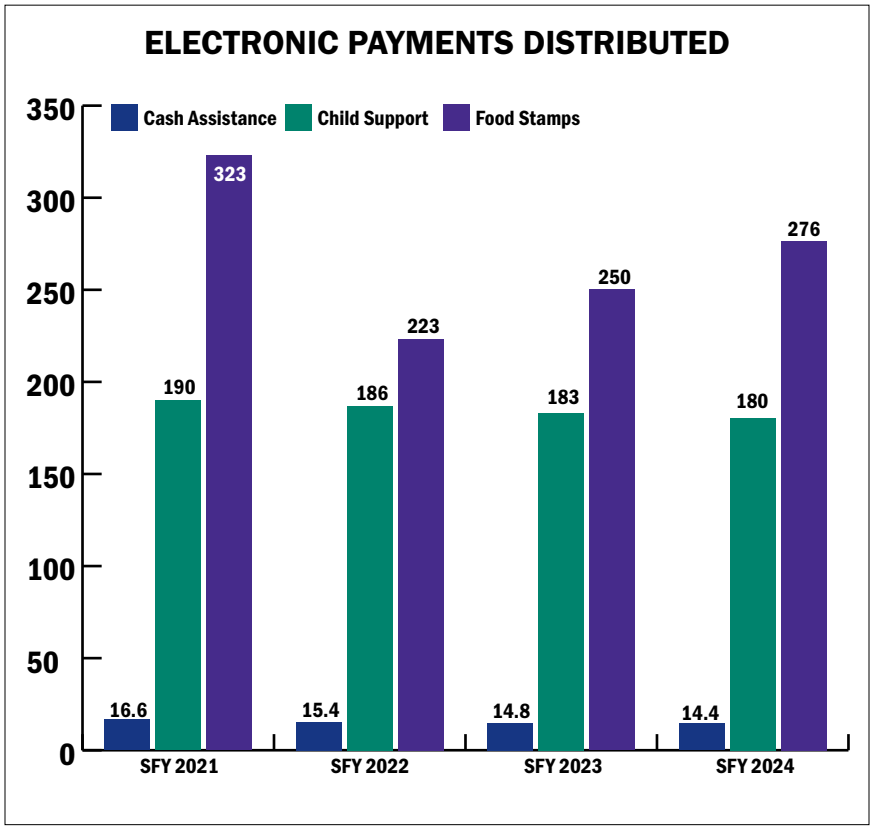
The EBT Group coordinates information and resources to meet the electronic payment needs of the department. Group members perform related contract monitoring activities; monitor federal, state and department laws and policies; assess governmental and industry changes for impacts to services related to all types of electronic payments; and provide necessary and appropriate information to management regarding electronic payment capabilities and mandated

requirements.

DHW contracts with Fidelity Information Services to set up and maintain accounts for food stamp benefits; cash assistance programs for the Temporary Assistance to Needy Families (TANF or TAFI); and Aid to the Aged, Blind, and Disabled (state supplement or AABD).

Participants access their food benefits with an EBT Quest Card. Participants receiving cash benefit payments have the option of accessing their cash on an EBT Quest Card or receiving the funds by direct deposit into a personal bank account.

DHW has a separate contract with US BANK for Child Support clients who choose to have their payments go to a Direct Payment Card (DPC). Child support payments can be accessed with a US BANK ReliaCard, or they can be deposited directly into a personal bank account.




## Revenue Operations

This unit is responsible for department-wide billing and collection activities. The Revenue Operations Unit pursues collection of outstanding debts, including DHW fee-for-service, third-party recovery, benefit overpayment, and any other monies receivable as negotiated through repayment agreements. Statewide billing and collection activities include:

- **DHW's fee-for-service programs, including:**
  - Designated exams, Department of Correction's evaluations, and court testimony billings
  - Medicaid's certified family home licensing fees
  - Criminal History Unit billing (including Adam Walsh background checks)
  - Bureau of Laboratories and public health district services
  - Disability determination records requests
  - Vital records requests
- **Medical billing for services that are reimbursable through third-party insurers and/or Medicaid for:**
  - Developmental disabilities
  - Infant Toddler Program
  - Adult and children's mental health
- **Overpayments, civil monetary penalties, and miscellaneous recoveries including:**
  - Provider and individual fraud (Welfare and Medicaid)
  - Foster care overpayments
  - Educational stipend defaults
- **Interagency billings**

### Grant Reporting

This unit ensures compliance with federal funding requirements by tracking reporting requirements and completing financial reports for more than 122 federal grants that fund DHW programs. The largest of these federal grants is Medicaid, for which the SFY 2024 expenditures were $4.3 billion.

### Cash Management

The Cash Management team ensures adequate cash is available for the department to meet its financial obligations, functioning as the financial liaison to human services programs by:

- Forecasting for short-term cash needs
- Drawing federal funds from the U.S. Treasury to meet immediate cash needs of federally funded programs
- Requesting state general and dedicated funds through the Office of the State Controller
- Reconciling cash balances with multiple federal agency records and the State Controller's Office to ensure accuracy of data

# DIVISION OF INFORMATION AND TECHNOLOGY

**ALVINO ARTALEJO,**
**INTERIM CHIEF INFORMATION OFFICER**
**208-334-0640**

The Division of Information and Technology provides office automation, information processing, network services, unified communications, and internet connectivity for the department statewide. The division provides leadership and direction in the use of information technology to support the department's mission to strengthen the health, safety, and independence of Idahoans.

The division is responsible for:

- Providing departmental direction in policy, planning, budget, and acquisition of information resources related to all IT projects and upgrades to hardware, software, telecommunications systems, and systems security
- Implementing a department-wide information technology governance program
- Overseeing the review, analysis, evaluation, and documentation of IT systems in accordance with Idaho rules and policies
- Maintaining all departmental information technology resources, ensuring availability, backup, and disaster recovery for all systems
- Securing information technology resources to meet all state, federal, and local rules and policies to maintain client confidentiality and protect sensitive information
- Overseeing development, maintenance, and enhancement of application systems and programs for all computer services, local area networks, and data communications internally and with external stakeholders
- Providing direction for development and management of department-wide information architecture standards

- Participating in the Information Technology Leadership Council to provide guidance and solutions for statewide business decisions
- Implementing the state's Information Technology Authority directives, strategic planning, and compliance

The division also collaborates with the state's Office of Information Technology Services in statewide messaging, communications, video conferencing, networking, strategic planning, and Information Technology Authority initiatives or directives. The division provides reliable, timely, high-quality, innovative, flexible, cost-effective IT solutions, working with our business partners to identify and prioritize products and required services.

## SFY 2024 HIGHLIGHTS

The division has completed multiple ongoing initiatives to support DHW's growing and evolving needs for information technology while improving efficiency in automation with limited resources.

Departmental operational and technical improvements included the following:

- Met budget targets through monitoring of expenditures through manual mechanisms
- Began implementation of a project governance program focused initially on ITSD, but will be used as a framework for all department programs
- Collaborated with the departments to create the first policies for data retention for the department. These policies focus on chat, voicemail and email.
- Restructured the department to have closer alignment of like resources and to improve manager to employee ratios.
- Completed a third round of a leadership training program for the department.



Network and CyberSecurity Operations

- Completed the upgrade of all Windows 2008 Systems to more current versions of the operating system
- Implemented TLS/Cipher Updates to disable vulnerable TLS protocols and ciphers on 550+ Windows servers, reducing our security risk
- Created a reporting mechanism to track cloud storage spending in Microsoft Azure
- Upgraded Veeam to v 12.1.1.56 for increased functionality and capability
- Rolled out four new lower cost Pure storage arrays for less critical workloads to decrease costs for DHW
- Nearly completed the Linux Rocky 9 Automated Build Process to allow a more modular build that can be tailored to the applications in use and the ability to rebuild a server in an automated fashion without data loss
- The cloud team worked on a number of fronts to set up the Google Cloud environment
  - Built out the core infrastructure, allowing on-premise virtual machines to be migrated to the Google Cloud
  - Worked with applications teams to support the migration of some systems
  - Supported data teams in deployment of serverless data solutions
  - Evaluated cost effective compute solutions to maximize spend
  - Configured access for infrastructure groups to perform their job functions and to sync permissions for Google from on-premise permissionsp
  - Configured security best practices for several Google environments to protect the systems from both external as well as unauthorized interal access
  - Ensured that data moving out to the cloud is authorized based on DHW's many compliance regulatory requirements

- Increased the Komprise threshold for stale data migrations to the cloud to three years, allowing more stale data to move from expensive on-premise storage to less expensive, cold cloud storage, to decrease costs for DHW
- Successfully addressed IRS audit findings to ensure compliance with the IRS
- Implemented DUO MFA Advantage for Workstations to require two methods of authentication prior to logging on, increasing security for DHW systems
- Upgrade Cisco AnyConnect to improve security and to allow DUO Host Checker to be implemented
- Implemented DUO Host Checker to ensure systems logging onto the DHW network meet security and compliance standards and reduce the risk of an out-of-date system causing a security incident
- Created an automated process to check for any account which hadn't logged in for 30 days and to validate them prior to disabling them, reducing the chance of an out-of-date account being compromised

## Network and CyberSecurity Operations

- Deployed Webex Softphones providing DHW users hybrid workplace phone options and reducing the number of desktop phones required
- Completed upgrades and update to Video Conferencing systems in PTC Building conference rooms including ceiling microphones and speaker systems to enhance collaboration experience
- Deployed Genetec HID door access control system at SWITC to provide physical security and access reporting.
- Configured and converted of all user voicemail boxes to deliver .wav files of received voicemails to email
- Completed the deployment of network infrastructure in time to open the Payette Assessment and Care Center (PACC) foster care facility. This included a full network deployment, data telecommunications installation, and Genetec security video surveillance system
- Completed data circuit upgrades and configurations to DHW field offices and enterprise DHW Internet connections to support increased data traffic supporting Return to Work new business model processing
- Deployment of new Google Interconnect circuits configured in a high-availability configuration to support cloud workloads and services deployed in the Google cloud
- Deployed Starlink satellite communication link at State Hospital North to enable seamless fail-over of telecommunications and VoIP phone services in the event of a primary telecommunications provider failure. This enables SHN to continue hospital operations without network disruptions.

## Project Services

- Moved the entire SharePoint 2016 platform to SharePoint Online for all of DHW. This was the culmination of a two-year effort and involved DHW staff from every division and many levels. Project was very successful and showcased DHW's ability to work as a agency
- Completed Ivanti Asset Management first phase; entered into maintenance phase and entering data into system
- Built a Disaster Recovery Testing template for use by anyone performing DR tests
- Researched highest 5 occurrences for Help Desk tickets/ issues for focused attention on those tickets which can potentially be avoided by better training, documentation, and/or training
- Performed Medicaid Learning Management System - performed the business analysis, and vendor research for Medicaid Learning Management System and negotiated a five year contract purchase with premium vendor support, implemented the software, helped customer setup system, and started training
- Built a large E-learning training for OneNote available to all DHW staff
- Started TAPP process rebuild, which is near completion
- Performed research for all cell phone mobility within DHW to identify potential ways to improve how we use them as well as identify potential cost savings; awaiting project to implement changes and realize significant savings over five years
- Analyzed and standardized our manual testing processes in ITSD
- Built and released countless division communications, information bulletins, training documents, etc. by Document and Training team

## Service Delivery

- Number of IT service calls answered: 22,638
- Average wait time in call queue : 60.25 seconds
- Incidents resolved (for all of IT): 639 incidents
- Service requests fulfilled (for all of IT): 7311 service requests
- Computers replaced with more modern, higher performing laptops: 1,651

The endpoint management team worked with Microsoft to enroll all DHW computers and laptops in a Microsoft service called Intune. This allows for more thorough management of patching and security posture on DHW's endpoints. Security assessment tools show that this resulted in a 68% reduction in the total number of vulnerabilities, but more importantly, a 98% reduction of DHW's risk score.

The new Payette children's foster care facility opened earlier this year. IT worked hard to provide new network and telecommunications services, as well as making sure employee and student laptops were ready and working to support the needs of the workers and guests present on opening day.

A new software approval process was started as part of the asset management initiatives that IT has been implementing. This allows for better conversations between IT and business units about new software coming into the DHW environment, allowing security review, governance, and support impacts to be considered before purchase, as well as providing a record for the future of the decision making process.

The past year has meant a lot of changes for the department with regards to DHW offices. IT assisted with moving staff out of the now closed Nampa Park Centre office, and got them back up and running in the Caldwell and Westgate offices. IT is also working with Management Services to remodel and adjust space in the In the Moscow office to keep staff working and productive there. Last but certainly not least, IT's efforts to support the directive to return staff back to offices from working fully remote were a huge success, with IT working hard to ensure

completely functional hardware and network services were available in all our offices to support staff immediately upon return.

**Continuous cybersecurity improvements:**

In April 2023, DHW had 1,062 open Cooperative Audit Program (CAP) findings from the latest IRS audit. As of the April 2024 CAP submission, DHW expects to have about 70 IT items remaining to close out the CAPs entirely. In the CMS Minimum Acceptable Risk Standards for Exchanges (MARS-E) compliance side of things, DHW completely resolved all items in the Plan of Action and Milestones (POAM) document that tracks deficiencies discovered in the annual MARS-E attestation.

*IT performed eDiscovery for more than 100 cases in the last year (PRRs, legal discovery and HR/admin functions).*

The InTune deployment was a group effort that is a behind the scenes system that had a big impact on DHW's vulnerability management and overall security posture. The implementation of this system reduced DHW's desktop security score by over 50%

**Initiatives to achieve environmentally friendly goals:** The division continues virtualization of servers to reduce the number of physical devices on the network, which will reduce power and cooling requirements.

All new computers are Energy Star rated and configured so that all computers go into sleep mode after a period of inactivity. This will result in less power used within the entire agency.

# DIVISION OF LICENSING & CERTIFICATION

**LAURA STUTE, ADMINISTRATOR**
**208-364-1959**

The Division of Licensing and Certification ensures that Idaho healthcare facilities and agencies follow applicable federal and state statutes and rules. The division oversees licensing and certification activities for the following types of healthcare providers:

- Ambulatory surgery centers
- Certified family homes
- Developmental disability agencies
- Home health agencies
- Hospice agencies
- Hospitals
- Portable x-ray providers
- Intermediate care facilities for people with intellectual disabilities
- Nursing homes
- Outpatient physical therapy and speech pathology
- Renal dialysis centers
- Residential assisted living facilities
- Residential habilitation agencies
- Rural health clinics
- Children's Residential Treatment Facilities
- Psychiatric Residential Treatment Facilities

Each unit in the division conducts its responsibilities in ways that promote individuals' rights, well-being, safety, dignity, and the highest level of functional independence. The division ensures high quality healthcare by completing on-site surveys, occurring at various intervals. The division also investigates

complaints about reported violations of health care regulations.

The division also works closely with healthcare providers by offering training, technical assistance, and resources aimed at improving the quality of care as well as compliance with licensing or certification requirements.

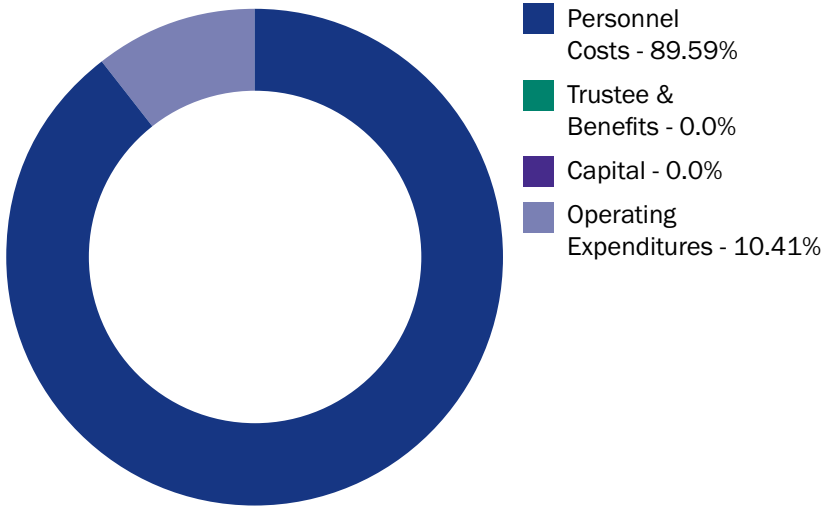
## DIVISION HIGHLIGHTS

- The Division of Licensing and Certification conducts on-site inspections for 19 different provider types and completed just over 4,500 total surveys this year.
- On-site surveys ensure providers are compliant with required health and safety regulations.
- In addition to performing recertification surveys and complaint investigations, the division engages in provider educational opportunities to create a partnership for better health outcomes.
- The division supports and encourages providers to achieve regulatory compliance by conducting in-person and virtual seminars and classes on a range of topics related to health and safety.
- The division conducts regular meetings with stakeholders, caregivers, and industry associations to better understand the challenges and successes of the many providers type DHW regulates.
- The division continues to struggle with workforce challenges, specifically recruiting for surveyors in the long-term care program. To address workforce issues, the division now employs surveyors with expanded clinical designations, (such as Licensed Practical Nurses, social workers, and licensed nursing home administrators), in addition to registered nurses. The long term care program has also developed a regional office to reduce travel requirements and expand recruiting efforts.

### SFY 2025 FUNDING SOURCES

*Authorized FTP: 71.9; Original appropriation for SFY 2024: general funds $2,334,500, total funds $8,692,400; .16% of DHW funding.*

### SFY 2025 EXPENDITURE CATEGORIES



## Bureau of Facility Standards

The Bureau of Facility Standards, in cooperation with the Centers for Medicare and Medicaid Services (CMS), serves and protects Idahoans requiring health-related services, supports, and supervision in care. The bureau licenses and certifies a variety of healthcare providers and suppliers, including skilled nursing facilities, intermediate care facilities for the intellectually disabled, hospitals, home health agencies, end-stage renal dialysis centers, ambulatory surgical centers, and hospice providers. The bureau also is the single focal point for fire, life safety, and healthcare construction standards in the state.

**The Long-Term Care Team** conducts licensing and certification activities to ensure that the state's skilled nursing facilities are following federal regulations and state rules. These facilities cannot receive Medicare or Medicaid payments if they do not comply with regulations.

**The Acute and Continuing Care Team** surveys, licenses, and certifies healthcare providers, such as hospitals, home-health agencies, hospice agencies, and intermediate care facilities for the intellectually disabled. These facilities must comply with federal and state regulations to receive Medicare or Medicaid payments.

**The Facility Fire Safety and Construction Team** provides oversight, training, and management of the facility fire safety and building construction requirements for all federally-certified healthcare facilities or state-licensed facilities. This team performs facility plan reviews and approvals; on-site plan inspections and finalizations; consultations; and periodic facility fire and safety surveys, which include complaint and fire investigations.

## Certified Family Home Program

Certified Family Homes (CFH) provide a safe, family-style living environment for adults who need some assistance with the activities of daily living but do not require a more restrictive institutional setting. There are usually one or two adult residents in a certified family home.

The CFH Program ensures that services are provided to residents in a manner that promotes their health, dignity, personal choice, and community integration. This program provides a safe and stable residence for about 3,050 individuals in more than 2,500 homes across the state.

## Developmental Disabilities Agency/Residential Habilitation Agency Certification Program

This program ensures developmental disability services and residential habilitation supported living services are provided in accordance with state laws and rules, and that they reflect national best practices. Developmental disability agencies are privately owned entities certified by the state to provide services to adults and children with intellectual disabilities on an outpatient basis.

Residential habilitation agencies are privately owned entities certified by the state to provide services to adults. They consist of an integrated array of individually tailored services and supports. These services and supports are available to eligible participants and are designed to assist them in living successfully in their own homes, with their families, or in an alternate family home.

## Children's Residential Facilities and Programs

This program licenses children's residential care facilities, outdoor therapeutic programs, foster care agencies, adoption agencies, and private non-accredited schools operating in Idaho to ensure services and care provided to children is in accordance with state licensing rule requirements. Children's agencies are privately owned and are funded through private pay arrangements and/or state contracts.

## Residential Assisted Living Facility Program

This program ensures that assisted living facilities in Idaho comply with state statute and rules. There are currently 275 facilities throughout the state with just over 10,000 licensed beds. Facilities range in size from six to 152 licensed beds. The average building size has remained consistent over the past three years at around 42 licensed beds per facility.

The program enforces compliance with state rules and works closely with residents, families, partners in the industry, advocates, other governmental agencies, and stakeholders to ensure safe and effective care to residents. Information on assisted living facilities in Idaho is easily accessible to the public: https://www.flareslive.com/portal/SearchFacility.aspx.

# DIVISION OF MEDICAID

**JULIET CHARRON,**
**DEPUTY DIRECTOR AND ADMINISTRATOR**
**208-364-1804**

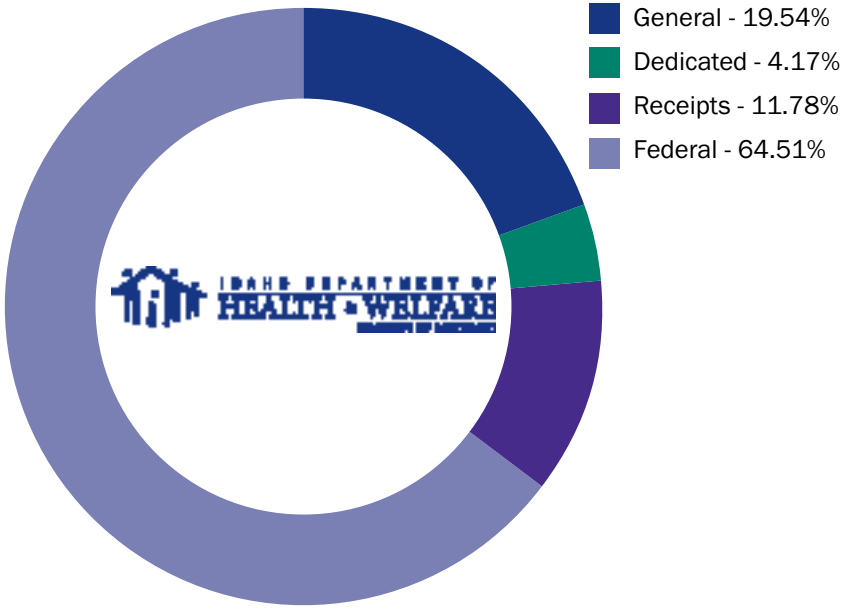
The Department of Health and Welfare administers Idaho's Medicaid program through the Division of Medicaid. Idaho Medicaid provides health care coverage through federal and state funds to eligible populations based on income and functional needs. Medicaid is an entitlement benefit. An entitlement benefit guarantees medically necessary healthcare will be provided to everyone that qualifies.

Medicaid offers multiple benefit plans and service options to meet the varying needs of its participants. The healthcare system offered through Idaho Medicaid is a partnership between Idaho and the federal government, through the Centers for Medicare and Medicaid Services.

Idaho Medicaid offers three healthcare plans.

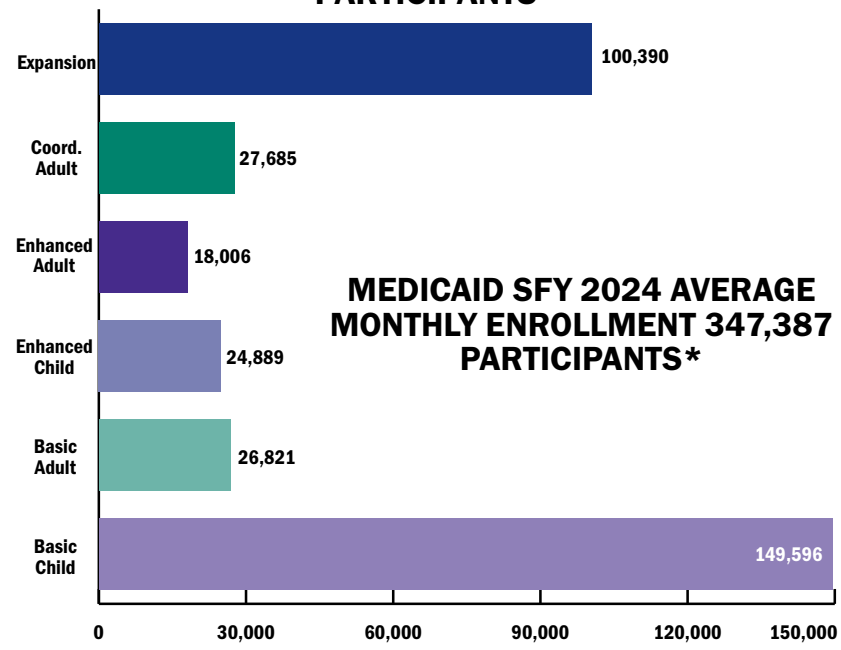
- **The basic plan** is for people who are in good health and don't generally have disabilities or special needs. This plan provides health, prevention, and wellness benefits. This plan includes the expansion population.
- **The enhanced plan** is for people with more complex health needs and medical conditions, disabilities, or special health needs, and for those over the age of 65. This plan provides all the basic plan benefits, plus developmental disability (DD) services, children's service coordination, and long-term care supports. This plan includes home and community- based services offered through the Aged & Disabled (A&D) and DD waivers.
- **The Medicare-Medicaid Coordinated plan (MMCP)** is for people who are eligible for and enrolled in both Medicare and Medicaid. This plan provides enhanced plan benefits, plus enrollment in a managed care plan to help coordinate Medicare and Medicaid benefits. These people also have access to a care coordinator.

## SFY 2025 FUNDING SOURCES



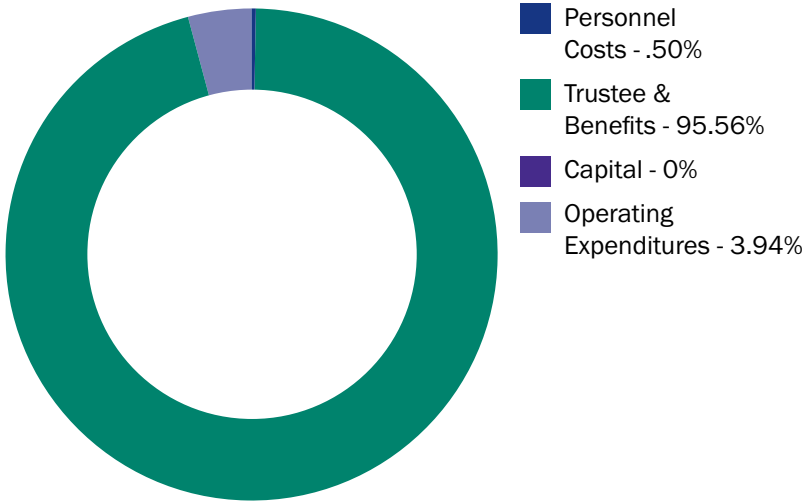

*Authorized FTP: 237.5; Original appropriation for SFY 2024: general funds $920,383,700, total funds $4,710,390,700; 86.34% of DHW funding.*

## SFY 2024 ENROLLEES AVERAGE MONTHLY PARTICIPANTS

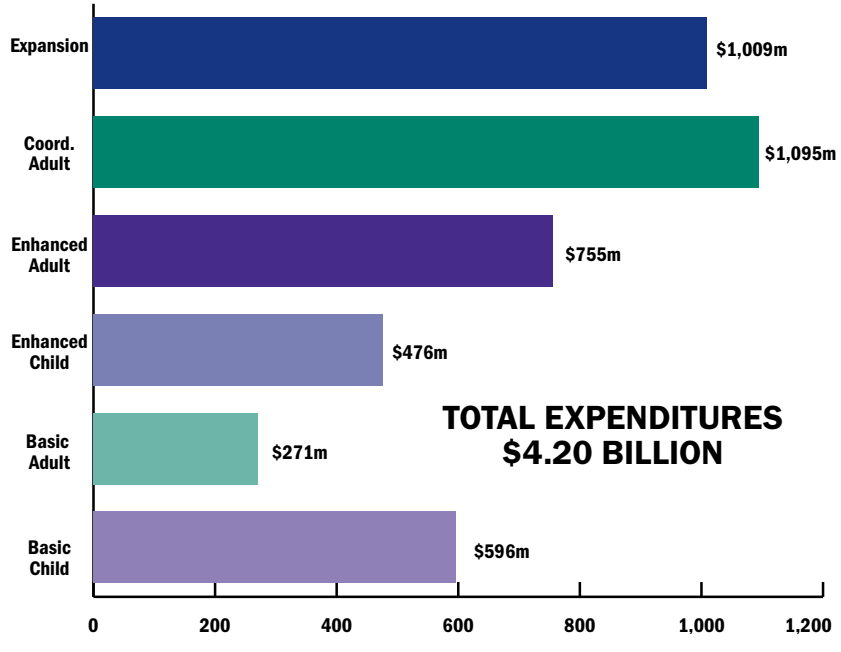



**This reflects enrollment during part of the continuous enrollment requirement during the Public Health Emergency.*

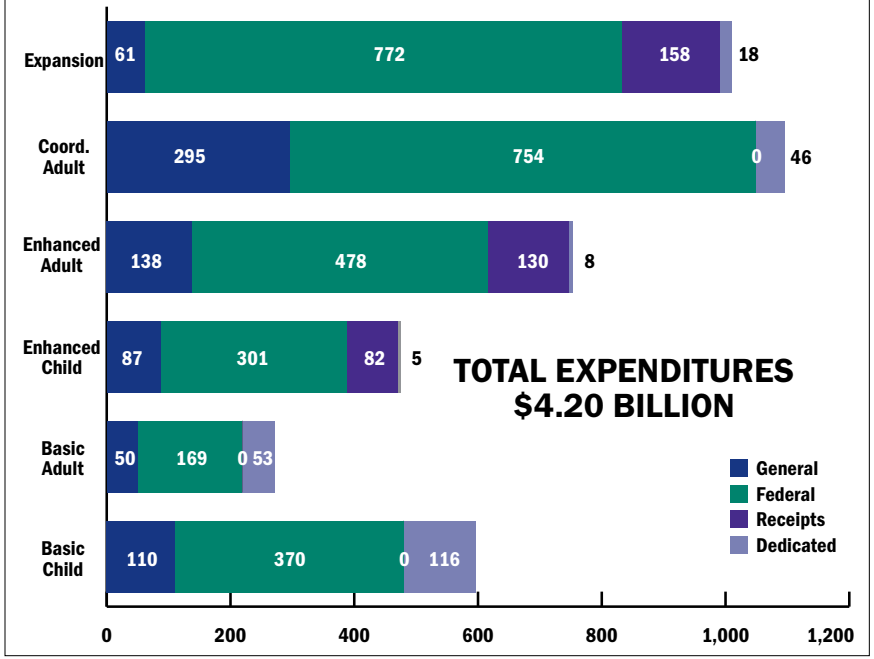
## SFY 2025 EXPENDITURE CATEGORIES



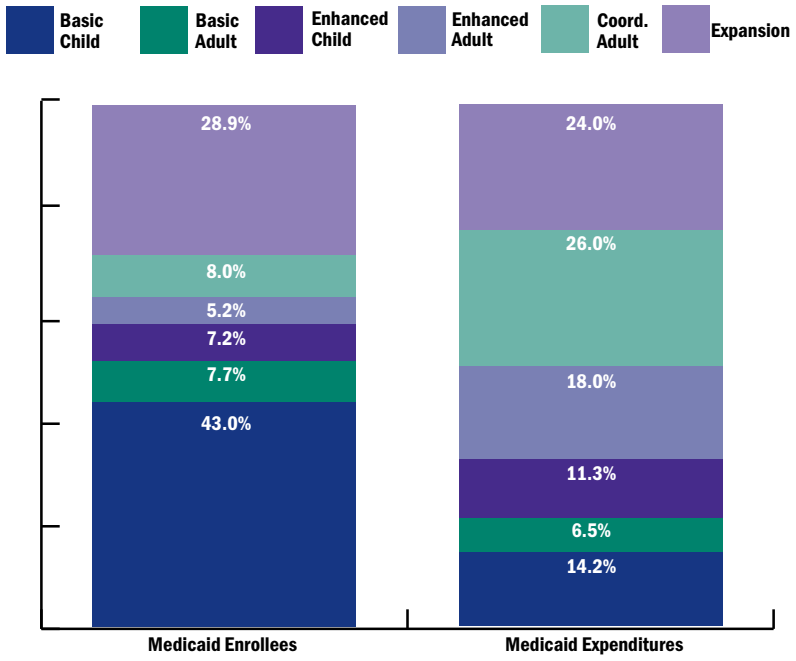

## SFY 2024 EXPENDITURES



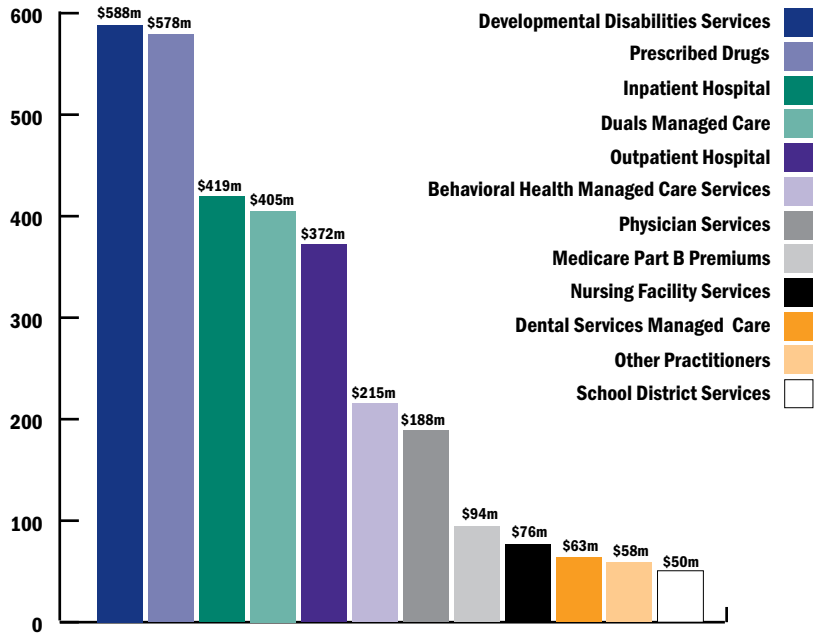
## SFY 2024 EXPENDITURES BY FUNDING SOURCE




## SFY 2024 ENROLLMENT AND EXPENDITURE COMPARISON




## MEDICAID SPENDING BY CATEGORY OF SERVICE




*Pharmacy numbers don't include rebates.

# SFY 2024 HIGHLIGHTS

## Universal Training Platform Launched

The Bureau of Long-Term Care implemented an online training platform for direct care professionals. The platform also serves as a statewide repository of certified direct care professionals. Access is free of charge, reducing administrative burden and enhancing the quality and consistency of training available in Idaho.

## Adult Developmental Disabilities Program Changes Continue

The bureau continues to collaborate with members, their families, providers, and advocates to transform the adult developmental disabilities program. This includes ongoing work to develop a new supports budget model and comprehensive service changes that will promote a truly person-centered program. Work includes identifying and implementing a new assessment tool to identify people's needed level of services and supports.

## Long Term Services and Supports Summit

The bureau organized a summit for Medicaid staff working within Long Term Services and Supports programs from across the nation. Staff from 21 states and the District of Columbia attended the two-day event in Boise. Each state shared strategies and lessons learned from programs they have implemented. The summit allowed staff to work together for solutions to complex problems, like Electronic Visit Verification and the direct care workforce crisis.

## New Idaho Behavioral Health Plan Contract

On July 1, 2024, the Division of Medicaid, in coordination with the Division of Behavioral Health, launched a new Idaho Behavioral Health Plan contract. Under this new contract, all behavioral health services including inpatient, outpatient, and residential for Medicaid and non-Medicaid covered Idahoans is administered under one contractor. This transforms a previously fragmented system of care into one that participants and families can more easily navigate and access needed services.

## Medicaid Management Information System Modernization Project

The division continues to work on the modernization and reprocurement effort. The project will span through fiscal year 2031 and adheres to the Center for Medicare and Medicaid Services' modular implementation guidance. The modernized system will replace dated technology, provide increased system flexibility to meet federal and state policy, make better use of market technology and enable improved programmatic outcomes. Vendor demonstrations are scheduled for fiscal year 2025.

The high-level objectives of the next generation system include:

- A platform that provides an efficient and easy provider experience.
- An enterprise system that is flexible to quickly adapt to the dynamic evolving needs of existing programs.
- Business processes that are automated wherever possible.
- Centralized access to data.
- Data analytics tools to support changing the health status of participants.
- Standardized and automated electronic communication and data exchange capabilities, easily integrating with other systems to enable enterprise-wide program management.

# BUREAU OF CARE MANAGEMENT

The Bureau of Care Management oversees 16 contracts. Tasks include troubleshooting complex issues participants and providers may encounter when working with the contractor. The bureau manages these contracts and monitors multiple areas of performance to ensure contractors provide the required services to participants and providers.

The bureau oversees:

- Dental
- Non-Emergency Medical Transportation
- Duals Medicare Medicaid Coordinated Plan – two contracts
- Duals Idaho Medicaid Plus – two contracts
- Other service contracts include, but are not limited to:
  - Healthy Schools, providing funding for Idaho school districts with the lowest resources to support school nurses.
  - Independent Assessments, assessments that determine eligibility for children needing Developmental Disability Services, Katie Beckett and Youth Empowerment Services.
  - Residential Habilitation Program Coordination for Certified Family Home Providers, providing orientation and skill trainings for providers.

# BUREAU OF LONG TERM CARE

The Bureau of Long Term Care conducts assessments and administers services for people with physical disabilities, the elderly, and other qualifying Idahoans who need support to remain in their homes and communities and avoid institutionalization. Services may include assisted living, in-home care to support activities of daily living, and specialized services like private duty nursing or personal emergency response buttons. Access to services depends upon individual assessed care needs.

Additional tasks include:

- Provider audits and complaint investigations.
- Processing applications and renewals for Behavioral Care Unit status, which allows a higher payment rate to nursing facilities working with individuals who have severe behavioral needs.
- Screening all individuals entering nursing facility care to determine if they need specialized services while they are institutionalized.
- Oversight of Idaho Home Choice, a grant that supports individuals moving out of institutional care and into their community.

## BUREAU OF DEVELOPMENTAL DISABILITY SERVICES

The Bureau of Developmental Disability Services administers services for Idahoans with developmental and/or intellectual disabilities that need support to remain in their homes and communities to avoid institutionalization. Services may include residential habilitation and targeted service coordination, and specialized services like behavioral intervention. The bureau offers multiple program pathways, designed to encourage individual choice and promote independence. Access to services depends upon individual assessed care needs and program type.

Additional tasks include:

- Coordination with the contractor who identifies people's needed level of services and supports, as well as those who create a plan to address those needs.
- Provider audits and complaint investigations.
- Program modifications and stakeholder engagement related to the K.W. v. Armstrong lawsuit.

## IDAHO BEHAVIORAL HEALTH PLAN GOVERNANCE BUREAU

The Idaho Behavioral Health Plan Governance Bureau oversees the state's managed care contract for behavioral healthcare services. The new contract, operated by Magellan Health, took effect on July 1, 2024, and combines Idaho Medicaid behavioral health benefits with services previously provided through the Division of Behavioral Health and the Idaho Department of Juvenile Corrections.

## BUREAU OF PHARMACEUTICAL CARE

The Bureau of Pharmaceutical Care operates Idaho Medicaid's pharmacy program, including a call center for providers. State Medicaid agencies are required to cover all FDA-approved drugs for their FDA-approved clinical uses if they have a federal rebate (discount), regardless of the effectiveness or cost of the drug. The bureau also manages Idaho Medicaid's Preferred Drug List (PDL) and therapeutic prior authorization program, the two major mechanisms available to make sure that patients receive the most effective drugs at the best final cost to the state.

The PDL identifies drugs preferred by Idaho Medicaid as first-line treatments for a disease. A first-line drug must typically be tried before another drug will be approved for the treatment of that disease and paid for by Idaho Medicaid. Clinical information for each PDL drug type is reviewed annually by the Idaho Medicaid Pharmacy and Therapeutics Committee, which consists of physicians and pharmacists who care for Idaho Medicaid participants. The committee advises Idaho Medicaid on drug effectiveness and safety.

The bureau has a strong clinical pharmacy team that develops criteria for non-preferred drugs, which are often expensive or have serious side effects. The pharmacy team carefully reviews prior authorization requests and is in close communication with providers who order medications.

# BUREAU OF CLINICAL AND QUALITY MANAGEMENT

The Bureau of Clinical and Quality Management oversees Idaho Medicaid's primary care program and utilization management work, to ensure that all participants can access the medically necessary services, treatments, and equipment they need to be healthy.

The bureau oversees the division's Quality Improvement Organization contract, which performs most utilization management tasks for the division and operates a case management program for pregnant persons with substance use disorder and other participants with complex medical conditions, especially when transitioning between different levels of care. The bureau reviews unique requests for non-covered services for youth under Early and Periodic, Screening, Diagnostic and Treatment (EPSDT), the federal authority under which state Medicaid agencies can pay for medically necessary services that are not included in the benefits or exceed the defined service limits for participants under age 21.

The bureau also oversees Healthy Connections (HC), Idaho Medicaid's primary care case management program, which connects participants with a primary care provider who can meet their preventive, chronic disease, and care coordination needs. HC primary care providers receive monthly tiered case management payments that depend on the number of Medicaid participants they serve and the complexity of their clinic's care coordination services, their Patient-Centered Medical Home status, their health Information Technology infrastructure, and their clinic hours.

### New requirements for individuals leaving incarceration

The bureau is working with colleagues across the department, from the Idaho Department of Corrections, and from the Idaho Department of Juvenile Corrections to stand up case management and health screenings thirty days prior to release from incarceration, in accordance with new federal law.

# BUREAU OF POPULATION HEALTH

The Bureau of Population Health oversees the division's quality and population health strategy, as well as Idaho Medicaid's value care program, known as Healthy Connections Value Care.

### Healthy Connections Value Care

The program aims to transform Idaho Medicaid's healthcare system and reimbursement from one that pays for quantity to one that values quality. The division has contracted with multiple organizations under value-based purchasing contracts. These value care organizations, which include hospital networks and primary care providers, are held accountable for outcomes and costs, in exchange for an ability to share in savings. The program went live in January 2022.

During the first performance year:

- Per-member-per-month actual costs and risk standardized costs were lower compared to the base year on a statewide level.
- Ten out of eleven value care organizations maintained per-member-per-month costs below their gross target and had the opportunity to share in savings.
- 67% of quality measures saw improvement compared to the baseline.
- 45% of quality measure targets were achieved.

After the first performance year several changes were made to increase the impact of the program. In the second performance year (2023), the Medicaid Expansion population was added. In the third performance year (2024), all value care organizations were required to take on risk and can work on optional quality measures in addition to mandatory quality measures.

### Population Health Strategy

The bureau is responsible for monitoring, reporting, and analyzing required quality measures as part of the Centers for Medicare and Medicaid Services Core Set Measures in addition to identifying areas for improved health outcomes and cost containment.

## MEDICAID OPERATIONS

### Spending and Service Delivery

Medicaid contracts with individual healthcare providers, agencies, institutions, and managed care entities to provide healthcare services for its members. In Idaho, Medicaid pays for healthcare services through two types of service delivery models; fee-for-service and managed care.

- Under the fee-for-service model, members can go to any Medicaid provider, the provider then receives payment for each service provided to a member.
- Under the managed care model, Medicaid contracts with managed care organizations, also called health plans, to provide a defined set of healthcare benefits for a defined set of members. Health plans must provide all covered, medically necessary services to members.

Managed care organizations administer healthcare benefit plans, using a network of providers for members to choose from for the delivery of their health-related services. Managed care organizations receive a per-member-per-month payment to manage healthcare for certain Medicaid enrollees, no matter how much or how little care a person receives.

By law, the Medicaid program is the payer of last resort. If another insurer or program has the responsibility to pay for medical costs incurred by a Medicaid-eligible individual, that entity is generally required to pay all or part of the cost of the claim prior to Medicaid making any payment. This is known as "third party liability". Third parties that may be liable to pay for services include:

- Private health insurance
- Medicare
- Employer-sponsored health insurance
- Settlements from a liability insurer
- Workers' compensation
- Long-term care insurance
- Other state and federal programs (unless specifically excluded by federal statute)

Medicaid spending fluctuates each year depending on how many individuals are enrolled and what services they need during the year. Children account for a significant proportion of Idaho Medicaid's expenditures. However, spending per person increases as individuals age, with those over the age of 65 accounting for the greatest average expenditure per person.

## BUREAU OF FINANCIAL OPERATIONS

The Bureau of Financial Operations oversees Medicaid's financial, budgetary, and reimbursement activities. The Bureau of Financial Operations collaborates with federal and state agency partners, department staff, Medicaid's fee-for-service and managed care program staff, and third-party contractors. They are responsible for projecting Medicaid spend and managing cash payments. They are responsible for provider interaction as it relates to reimbursement, and they are responsible for financial recovery.

# BUREAU OF POLICY

The Policy Bureau oversees current, new, and emerging programs within the division. This includes federal and state policy work, such as the creation and management of State Plan Amendments, waivers, and statutes. They provide guidance to decision makers on proper authority for programs, and draft rules and legislation.

### Project Management Office

The Project Management Office is the governance body for all Medicaid projects. The Project Management Office maintains standard project management processes and templates, provides project management expertise, measures and evaluates resources, and supports all project leaders in the division.

# MEDICAID MANAGEMENT INFORMATION SYSTEM

The Medicaid Management Information System is a required set of integrated and automated computer processing systems. It was developed to meet Medicaid's objectives of administering benefits and meeting federal reporting requirements.

Idaho's system supports key business processes which include, but are not limited to:

- Provider enrollment
- Participant eligibility, including enrollment in managed healthcare plans
- Payment calculations, including prior authorization of services
- Claims and encounter data processing
- Financial management and reporting
- Medicaid plan premium collections
- Third-party liability verification and collections

The current Idaho Medicaid Management Information System has over 120 data interfaces, with daily, weekly, and monthly exchange frequencies between various systems to carry out this service. The Idaho Medicaid Management Information System is supported by three service vendors and each primary function is outlined below.

### Pharmacy Benefit Management services by Magellan Medicaid Administration (Prime RX).

Magellan Medicaid Administration (Prime RX) is Idaho's contracted Pharmacy Benefits Administrator with responsibility for the following areas:

- Automated claims system for all point-of-sale prescription drug claims; 160,000 drug claims processed per week (which include paid, reversed, and denied claims).
- Clinical edits to prevent drug overdoses and adverse drug reactions.
- Automated drug appropriate use screening.
- Pharmaceutical drug rebate collection.
- Compliance with the Centers for Medicare and Medicaid Services and federal regulations.

## Medicaid provider enrollment and claims processing services by Gainwell Technologies.

Gainwell is Idaho's contracted State Fiscal Agent and Medicaid Management Information Systems base vendor with responsibility for the following areas:

- Provider enrollment.
- Credentialing and management of 60,000 active provider records.
- Management of participant eligibility record.
- Medical claims processing for over 144,000 medical claims per week.
- Financial transactions management to include weekly payment file coordination of millions of dollars to thousands of providers and processing of managed care monthly capitation payments for five managed care organizations and 450 primary care organizations.
- Coordination of benefits with other payers, such as Medicare and commercial insurance.

## Medicaid data warehouse, analytics and federal reporting services by IBM Watson Health.

IBM is Idaho's contracted Decision Support System and Data Warehouse vendor with responsibility for the following areas:

- Enterprise data warehouse for the storage and retrieval of information.
- Decision support system analytic and data management tools.
- Expertise in the creation, review, and submission of required federal reporting such as Transformed Medicaid Statistical Information System.

# DIVISION OF PUBLIC HEALTH

**ELKE SHAW-TULLOCH, ADMINISTRATOR**
**208-334-6996**

The Division of Public Health is nationally accredited by the Public Health Accreditation Board and protects the health and safety of Idahoans through a broad range of services and activities. These include maternal and child health services, vital records administration, health statistics compilation, immunizations, suicide and drug overdose prevention, chronic and communicable disease prevention and intervention, food safety regulation, emergency medical personnel licensing, rural healthcare provider recruitment and retention, advance care directive registry services, laboratory services, and emergency preparedness and response.

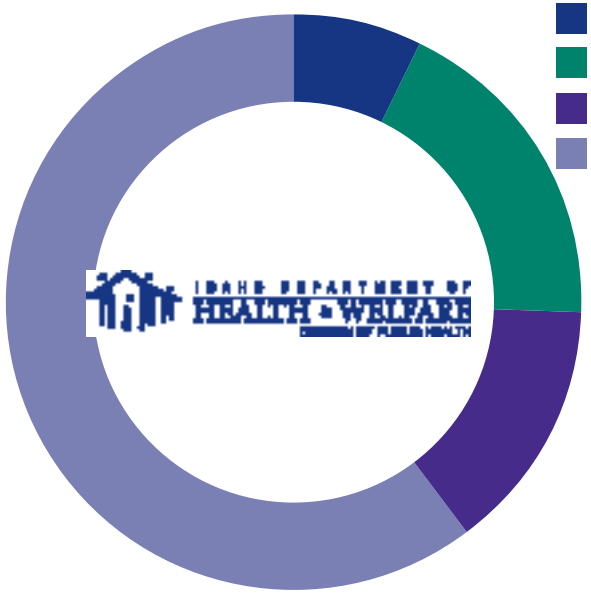
The division's programs and services promote healthy lifestyles while monitoring and intervening in adverse health conditions as a safeguard for Idahoans. The division subgrants and coordinates with local public health districts and other local providers to deliver many of these services throughout the state.

The division collects, manages, and maintains large amounts of population health data and makes these data available through several public-facing dashboards that focus on leading causes of sickness and death, community and environmental factors, and other disease-specific measures that indicate health status and outcomes. The division also provides data reports, including results from the Behavioral Risk Factor Surveillance System and the Pregnancy Risk Assessment Tracking Survey. Additional information about public health data and data dashboards can be seen at www.gethealthy.dhw.idaho.gov.

The Division of Public Health implements its programs and services through the bureaus of:

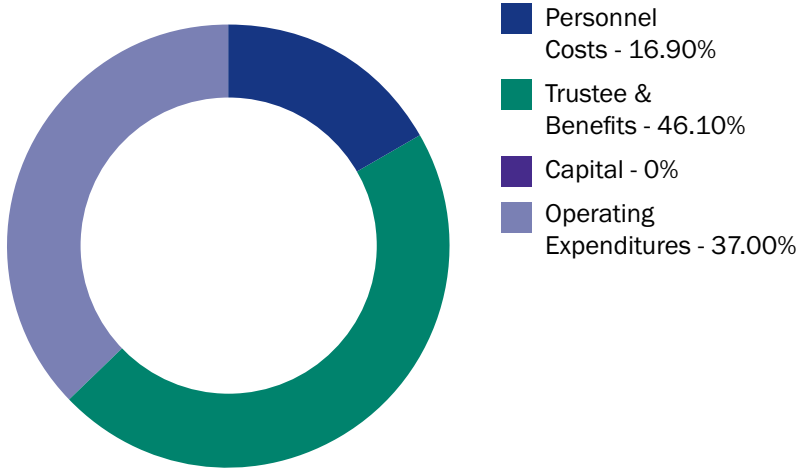
- Clinical and Preventive Services
- Environmental Health and Communicable Disease
- Community Health
- Emergency Medical Services and Preparedness
- Laboratories
- Rural Health and Primary Care
- Vital Records and Health Statistics
- Office of Accreditation and Planning

## SFY 2025 FUNDING SOURCES

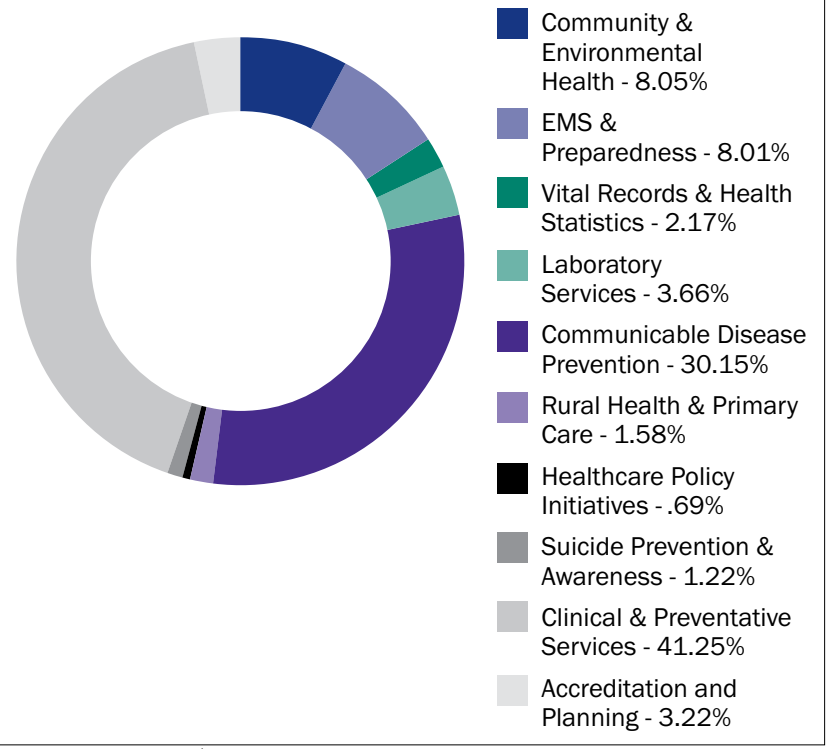



*Authorized FTP: 256.52; Original appropriation for SFY 2024: general funds $12,116,900, total funds $164,022,400; 3.01% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES




## SFY 2025 APPROPRIATION BY PROGRAM


Community & Environmental Health - 8.05%
EMS & Preparedness - 8.01%
Vital Records & Health Statistics - 2.17%
Laboratory Services - 3.66%
Communicable Disease Prevention - 30.15%
Rural Health & Primary Care - 1.58%
Healthcare Policy Initiatives - .69%
Suicide Prevention & Awareness - 1.22%
Clinical & Preventative Services - 41.25%
Accreditation and Planning - 3.22%

# FY 2024: DIVISION HIGHLIGHTS

- In May 2024, the Division of Public Health achieved national reaccreditation from the Public Health Accreditation Board (PHAB), a nonprofit body that accredits public health agencies in the United States. The division was initially accredited in 2017. The voluntary reaccreditation process improves and protects public health by advancing and transforming the quality and performance of public health departments across the nation through systems change.
- The Environmental Health Program provided nearly 3,000 free radon tests to Idahoans and helped nearly 300 callers requesting information on topics that impact health such as mold, lead, radon, and air quality.
- The Idaho Immunization Program hosted 11 in-person and virtual educational events for Idaho immunization providers, with more than 600 attendees statewide.
- In November 2023, Idaho was the first US jurisdiction to implement Fast Healthcare Interoperability Resources (FHIR) messaging system to transmit mortality data to the National Center for Health Statistics and to fellow US Vital Records jurisdictions. This international standards base replaced a 20-year-old, single-purpose file system.
- In June 2024, Vital Statistics replaced its 15-year-old Electronic Death Registration System with a modern replacement that was built in-house called EDRS 2. This version includes security enhancements, expanded certificate ordering options, fully automated supplemental coroner reporting, and digital document creation.
- In state fiscal year 2024, Idaho Bureau of Laboratories (IBL) received 382 animal specimens for rabies testing. Of these 382 samples, 25 tested positive. Rabies infection is nearly 100% fatal without prompt treatment. Prompt, accurate testing results allowed 25 people in Idaho who had been exposed to a rabid animal to receive life-saving treatment. It also provided relief to 357 Idahoans and their families who thought they might have been exposed to rabies but who found out through testing they were not. Rabies testing at IBL helped direct 25 people into life-saving care and saved nearly $35,700 in potential post-exposure treatment costs.
- The Division of Public Health worked with Boise State University's School of Population and Public Health to establish an academic health department. This is an informal partnership between the division and the university that will support public health improvements in Idaho through internships, project collaboration, DPH staff teaching in public health classes, and other activities.

# OFFICE OF ACCREDITATION AND PLANNING

The Office of Accreditation and Planning (OAP) was established in 2024 to support the division's vision of excellence as it promotes, protects, and improves the quality of health of Idaho's communities through the Public Health Accreditation Board foundational capabilities and standards, research, evidence-based models of practice, education, technical assistance, and evaluation.

OAP oversees implementation and adoption of accreditation requirements, strategic alignment of programs, workforce support, performance management and accountability, quality assurance, quality improvement, and statewide assessment and planning.

The division was first accredited in 2017 and was re-accredited in May 2024. To reach and maintain this status, continuous performance management and quality improvement is necessary; infrastructure building in the way of policies and processes must be defined and continually evaluated; and training and expectation-setting of staff must be assured.

The mission of OAP is to advance and transform public health practice by upholding performance improvement, solid infrastructure, and data-driven innovation. OAP manages the statewide comprehensive health assessment and statewide health improvement plan. Through this work, the division supports community-driven changes to make residents healthier and give them healthier options based on their unique needs.

# BUREAU OF CLINICAL AND PREVENTIVE SERVICES

The Bureau of Clinical and Preventive Services focuses on preventing and treating sexually transmitted diseases; providing services for women, infants, and children; and improving maternal and child health. The bureau's programs include:

- HIV Prevention Program
- HIV Care Program
- Sexually Transmitted Disease (STD) Prevention
- Viral Hepatitis Prevention Program
- Women, Infants, and Children Program
- Family Planning Program
- Maternal and Child Health Program
- Idaho Home Visiting Program
- Newborn Screening Program

## HIV Prevention Program

The HIV Prevention Program is a federally funded program that supports HIV prevention services throughout Idaho. Overall, the program has partnerships with more than 40 organizations to offer important HIV prevention services throughout the state. Services include rapid HIV testing, including HIV self-testing; links to medical care; referral services for pre- and post-exposure prevention; condom distribution; and partner notification services for those newly diagnosed.

The program issues subgrants to local public health districts, Federally Qualified Health Centers, free clinics, and community-based organizations to provide free, rapid HIV testing, including a mobile testing service by those agencies that have a mobile testing unit; educational information; connections to health care; and social marketing campaigns that address the importance of reducing stigma and increasing awareness regarding HIV/AIDS, sexually transmitted infections, hepatitis C, treatment options, medications to prevent transmission, and

other prevention approaches. Although these services focus on HIV prevention, the program has a whole-person care approach centered on improving Idahoans' health.

Additional information about the HIV Prevention Program can be found at https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/hiv.

## HIV Care Program

The HIV Care Program manages services for people living with HIV, including medical case management, the Ryan White AIDS Drug Assistance Program, and services that help enhance access and retention in HIV medical care and treatment.

The Ryan White AIDS Drug Assistance Program (ADAP) links people living with HIV/AIDS to HIV-specific medical services; enrolls eligible clients in Medicare, Medicaid, and other designated payment sources; assesses clients' medical care and support needs; and develops a plan of care for each person.

In 2021, there were 1,193 people diagnosed with HIV living in Idaho; of those, 1,031 individuals had received medical care for their diagnosis and 956 individuals had a suppressed viral load, which means they were managing their HIV and preventing spread of the infection to other people through taking HIV medication to reduce the amount of HIV in the body.

The Ryan White Part B Program (RWPB) addresses gaps in care for people living with HIV by providing support services that help clients stay engaged in care to reduce their viral load. HIV care services focus on secondary prevention to reduce the severity of the disease and increase overall health of the people enrolled in care.

During 2023, there was an increase of 27% of people who received medication support through the Ryan White AIDS Drug Assistance Program. Of those, 74% were at or below 250% of the federal poverty level. The Idaho Ryan White Part B program supported 344 clients with services, including outpatient ambulatory health care, medical case management, oral health care, home and community-based health services, HIV laboratory tests, medical transportation to HIV medical appointments, and payment assistance for housing, utility, and grocery bills.

Additional information about the HIV Care Program can be found at https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/hiv.

### 2023 AIDS DRUG ASSISTANCE PROGRAM DATA

| | |
|---|---|
| Total number of clients who received ADAP services | 467 |
| Clients served who were at or below 250% of the Federal Poverty Level | 74% |
| Ethnicity | |
| Hispanic/Latino | 24% |
| Non-Hispanic | 71% |
| Not reported | 5% |
| Gender | |
| Male | 85% |
| Female | 14% |
| Transgender Male to Female | 1% |

### 2023 AGE RANGE OF CLIENTS WHO RECEIVED RYAN WHITE PART B SERVICES

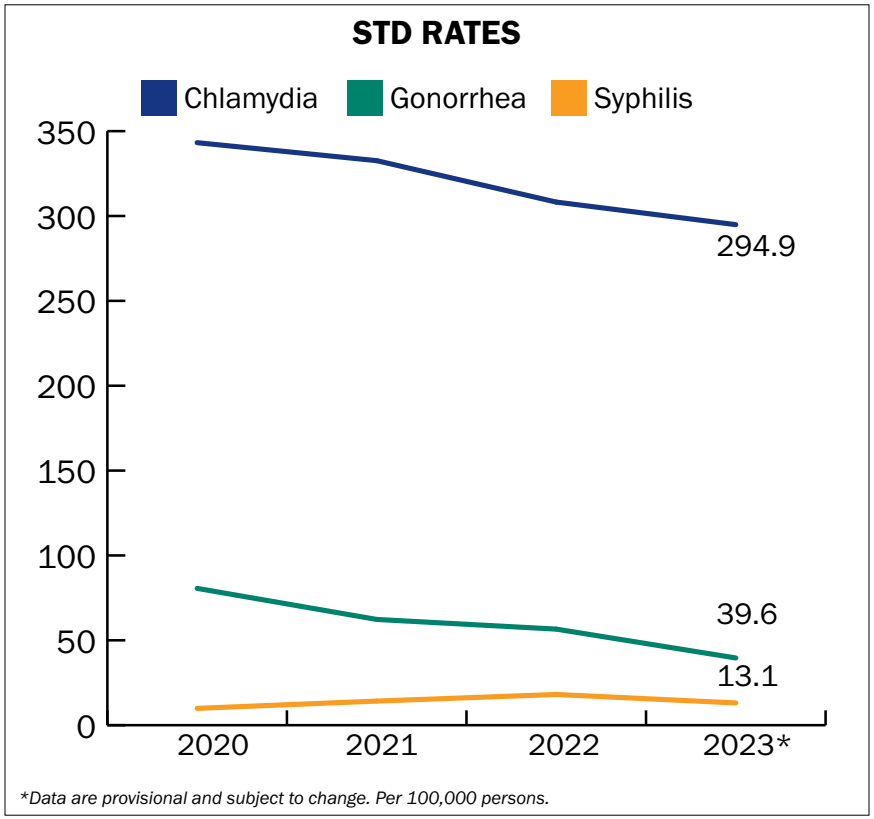
| Age range | Percent |
|---|---|
| 64 + Years | 19% |
| 63-54 Years | 21% |
| 53-44 Years | 25% |
| 43-34 Years | 21% |
| 33- 24 Years | 13% |
| 23-14 Years | 1% |

## Sexually Transmitted Diseases Prevention Program

The Sexually Transmitted Diseases (STD) Prevention Program is a federally funded program that works to prevent STDs throughout Idaho. The program's activities include testing; connections to treatment; education and outreach; and STD partner services for newly diagnosed clients and their partners.

In 2023, there were more than 6,878 cases of chlamydia, gonorrhea, and syphilis in Idaho. The program continued to offer Idaho's first home-based STD testing program (LetsGetChecked) to improve access to testing in rural parts of the state and for those who may be reluctant to seek testing in a clinical setting. A total of 350 total at-home tests were completed in 2023.

Additional information about the STD Prevention Program can be found at https://healthandwelfare.idaho.gov/providers/hiv-std-and-hepatitis-providers/sexually-transmitted-diseases.




## Viral Hepatitis Prevention Program

Idaho's Viral Hepatitis Prevention Program works to prevent new hepatitis C infections in Idaho and ultimately eliminate hepatitis C in the state. The program's activities include supporting rapid testing; connections to medical care and treatment; and education and outreach.

In Idaho, chronic liver disease and cirrhosis are the 10th leading cause of death, and viral hepatitis is a major contributor to liver disease. In 2023, there were 891 chronic hepatitis C cases and 92 chronic hepatitis B cases in Idaho. In the past year, the program partnered with 22 organizations to provide hepatitis C point of care tests throughout the state. This statewide collaborative effort contributed to 9,489 Idahoans being tested and 124 Idahoans being linked to care. Additionally, the program partnered with Idaho Bureau of Laboratories to implement hepatitis C confirmatory testing at no cost to patients experiencing financial hardship.

The program also supported ECHO (Extension for Community Health Outcomes) Idaho Viral Hepatitis Liver Care Series to present 36 training sessions to healthcare providers from August 2021 through August 2024. The series aims to improve provider knowledge, confidence, and evidenced-based best practices in treating and managing viral hepatitis and liver care. A total of 308 attendees participated in the Liver Care Series. Near universal agreement was reported for respondent satisfaction for the program from 2021-2024 sessions, as well as for perceived benefits of learning new and beneficial information.

In 2023, the Viral Hepatitis Prevention Program conducted monthly hepatitis technical advisory meetings. Multiple stakeholders across the state completed the draft plan to eliminate hepatitis in Idaho.

Additional information about the Viral Hepatitis Prevention Program can be found at https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/hepatitis.

## Women, Infants, and Children (WIC) Program

The Women, Infants, and Children (WIC) Program offers nutrition and health assessments, nutrition education, breastfeeding support and healthy food benefits to low and middle-income Idaho families to promote optimal growth and development for babies and children. The program is federally funded, and the services are delivered through Idaho's seven local public health districts, Marimn Health, and Nimiipuu Health.

The program provides benefits on a WIC card that can be used to purchase specific foods based on each participant's nutritional needs. On average, $66 worth of healthy foods are redeemed per participant each month at Idaho grocery stores. WIC accomplishments in the past state fiscal year included:

- Assessed and counseled more than 49,000 WIC participants, a 6% increase from last year
- Received a Breastfeeding Performance Bonus Award from USDA in recognition of outstanding achievement in sustaining high breastfeeding rates among WIC participants. Idaho ranked 2nd out of 89 WIC agencies
- Administered a participant satisfaction survey to evaluate post-pandemic experiences and inform efforts to enhance program participation, satisfaction, and retention. Received over 3,500 responses
- Successfully piloted a new WIC appointment scheduling software with two local public health districts to provide a scheduling software that increases consistency across WIC clinics while also reducing costs. The program is managed at the state.

Additional information about the WIC program can be found at wic.dhw.idaho.gov.

### WIC PARTICIPANTS SERVED MONTHLY AND AVERAGE MONTHLY FOOD BENEFITS PURCHASED TABLE

| SFY Report Year | Participants Served | Average monthly food benefits purchased |
|---|---|---|
| **2024** | 31,131 | $66 |
| **2023** | 30,200 | $64 |
| **2022** | 28,925 | $54 |
| **2021** | 30,409 | $45 |

## Family Planning Program

The Idaho Family Planning Program (IFPP) administers funding to four Idaho public health districts and two federally qualified health centers to provide comprehensive family planning services for Idahoans at 44 clinic sites.

In 2023, 22,411 babies were born in Idaho. Of these births, 80.5% of mothers were 20-34 years old, and 30.9% of all births in Idaho paid for by Medicaid. The birth rate in 2023 in Idaho was 11.4, slightly above the national average of 11.0 per 1,000 population.

Also in 2023, the Idaho Family Planning Program served 7,392 clients in 10,844 visits. Of those clients, 93.5% had household incomes at or below 250% of the federal poverty level and 51.4% were uninsured.

Family planning clinics in Idaho provide a safety net of affordable, high-quality healthcare services, which include pregnancy testing; birth control options and education; sexually transmitted disease education, testing and treatment; wellness exams, breast and cervical cancer screenings; immunizations; and referrals to specialists and community resources.

Additional information about the Family Planning Program can be found at https://healthandwelfare.idaho.gov/services-programs/children-families/idaho-family-planning-program.

## Maternal and Child Health Program

The Idaho Maternal and Child Health (MCH) Program supports a spectrum of services, from infrastructure-building services like quality assurance and policy development, to gap-filling services of direct health care services for children and youth with special healthcare needs. The MCH Program has several program priorities based on a five-year needs assessment related to the following populations: women, infants, children, adolescents, and children and youth with special healthcare needs.

Idaho's MCH Program is committed to improving the health and well-being of mothers, infants, and children, including children and youth with special health care needs, and their families. Idaho selected 10 MCH priorities across the population domains based on the 2020 needs assessment, including:

- Supporting services, programs, and activities that promote safe and healthy family functioning
- Increasing the percent of women accessing prenatal and well-woman health care
- Decreasing tobacco use during pregnancy
- Improving breastfeeding rates
- Improving access to medical specialists for children with youth and special health care needs.

For a full list of Idaho MCH priorities with objectives and strategies visit https://healthandwelfare.idaho.gov/health-wellness/womens-health-pregnancy/idaho-maternal-and-child-health.

The Idaho MCH Program is in the process of completing the 2025 five-year needs assessment. This is a comprehensive statewide needs assessment to collect information related to existing services and programs, population needs, gaps and barriers in care, health status, and emerging issues for MCH populations to assure that the MCH Program is guided by the unique needs of Idaho.

## Idaho Home Visiting Program

The Idaho Home Visiting Program (IHVP) provides funding to Idaho's seven local public health districts to deliver evidence-based, voluntary home visiting services to expectant parents and families with young children. Participants gain knowledge and skills to support their children's health and well-being, ensuring a great start to life. The program funds services in 27 Idaho counties using two evidence-based home visiting models: Parents as Teachers and Nurse-Family Partnership.

Parents as Teachers serves pregnant women and families with children from birth to age 5. Families may enroll at any point and receive services for at least two years. Parent educators offer 12 to 24 visits annually, depending on the needs of the family.

Program target outcomes include:

- Increase parent knowledge of early childhood development and improve parenting practices
- Provide early detection of developmental delays and health issues
- Prevent child abuse and neglect
- Increase children's school readiness and success

Nurse-Family Partnership serves first-time, low-income pregnant women and their babies. Clients receive their first home visit with a nurse before the 29th week of pregnancy. Visits then happen weekly or bi-weekly until the child is 20 months old, and then monthly until the child is 2 years old.

Program target outcomes include:

- Improve prenatal health and outcomes
- Improve child health and development
- Improve families' economic self-sufficiency and maternal life course development

### FAMILIES SERVED THROUGH HOME VISITING SERVICES IN IDAHO

| FFY Report Year | Families Enrolled | Completed Home Visits |
|---|---|---|
| **2023** | 625 | 5939 |
| **2022** | 555 | 5260 |
| **2021** | 508 | 5066 |
| **2020** | 537 | 5798 |

## Newborn Screening Program

The Newborn Screening Program works with hospitals, birth centers, midwives, and healthcare providers to screen all babies born in Idaho for harmful or potentially fatal conditions. This is a voluntary screen.

Most infants with conditions identified through newborn screening show no obvious signs of disease after birth. The screening provides an opportunity for early diagnosis and treatment and allows for normal growth and development and a reduction in infant death and disease.

In Idaho, two blood spot screens are conducted, one in the 24 to 48 hours after birth and another when the infant is between 10 and 15 days old. For each screen, a small amount of blood is collected from the baby's heel, placed on special filter paper, and sent to a regional laboratory for testing. When a screening is positive, the Newborn Screening Program coordinates with the laboratory and the baby's healthcare provider to ensure timely diagnosis and treatment.

Healthcare providers also check for congenital critical heart disease between 24 and 48 hours of life using pulse oximetry, a painless test that measures the amount of oxygen in an infant's blood. For congenital critical heart disease screenings with low oxygen results, healthcare providers connect infants with appropriate diagnostic services and follow-up care.

Idaho screens for 51 conditions. Even though each of the screened conditions is rare, collectively they affect about 1 in 1,000 infants. There are 20 to 40 Idaho infants diagnosed with a condition through these screenings each year.

Additional information about the Newborn Screening Program can be found at https://healthandwelfare.idaho.gov/services-programs/children-families/dried-blood-spot-and-cchd-newborn-screening.

### NUMBER OF DIAGNOSED CONDITIONS BY TYPE AND CALENDAR YEAR:

| Condition | 2020 | 2021 | 2022 | 2023 |
|---|---|---|---|---|
| **Biotinidase Deficiency** | 0 | 0 | 1 | 0 |
| **Congenital Hypothyroidism** | 7 | 23 | 25 | 22 |
| **Cystic Fibrosis** | 5 | 1 | 1 | 5 |
| **Galactosemia** | 0 | 0 | 0 | 1 |
| **Medium Chain Acyl-CoA Dehydrogenase DeficiencyMCAD** | 1 | 2 | 2 | 3 |
| **Phenylketonuria** | 5 | 1 | 1 | 3 |

### NUMBER OF BABIES SCREENED, PRESUMPTIVE POSITIVES, AND DIAGNOSED CONDITIONS BY YEAR:

| CY | Babies Screened | Presumptive Positives | Diagnosed Conditions |
|---|---|---|---|
| **2023** | 21,449 | 1,600 | 39 |
| **2022** | 22,140 | 1,523 | 40 |
| **2021** | 21,948 | 777 | 29 |
| **2020** | 21,534 | 1,369 | 24 |

# BUREAU OF ENVIRONMENTAL HEALTH AND COMMUNICABLE DISEASE

The Bureau of Environmental Health and Communicable Disease includes programs that monitor disease trends and epidemics; prevent the spread of communicable diseases; prevent diseases through immunization; help safeguard Idaho's food supply; provide education about how to maintain healthy environments at home, work, and school; and collaborate to minimize environmental public health hazards. The bureau's main program areas are:

- Disease Surveillance and Analytics
- Epidemiology
- Environmental Health and Food Protection
- Immunization

## Disease Surveillance and Analytics

The Disease Surveillance and Analytics Program administers, manages, and maintains data systems and applications to support other programs in the division. The program manages data dashboards to make sure Idahoans have access to summary information about diseases being monitored in Idaho, including viral respiratory diseases, sexually transmitted diseases, tuberculosis, and rabies.

The use of electronic systems significantly reduces the time it takes to receive and respond to reports of disease, and facilitates disease intervention, analysis, and reporting. More than 98% of reports from laboratories are received electronically, and 99% of all emergency department visits are received from hospitals electronically. Clinical case reports for reportable diseases and conditions are also received electronically from electronic health record systems, increasing the ability to rapidly exchange information and respond to reports of diseases or conditions to prevent further transmission or exposure. During SFY 2024, the program increased the amount of data being received from urgent care centers for unscheduled medical visits for non-emergency reasons, increasing its ability to monitor community trends for certain symptoms of illness such as fever or cough.

To view the data dashboards managed by the Disease Surveillance and Analytics program, visit: https://www.gethealthy.dhw.idaho.gov/infectious-disease-idaho.

## Epidemiology

The Epidemiology Section provides statewide leadership by providing funding, consultation, and direction to Idaho's seven local public health districts for the investigation and prevention of communicable and infectious diseases. These diseases include 74 reportable diseases and conditions that include bloodborne, enteric (intestine), vaccine-preventable, zoonotic (animal-born), and respiratory diseases.

The section includes programs focused on the design of methods to track and monitor diseases, interventions to control outbreaks and prevent future infections, epidemiologic analysis expertise, disease investigation capacity, tuberculosis consultation and treatment services, and the promotion of infection control practices and prevention of healthcare-associated infections and multi-drug resistant organisms.

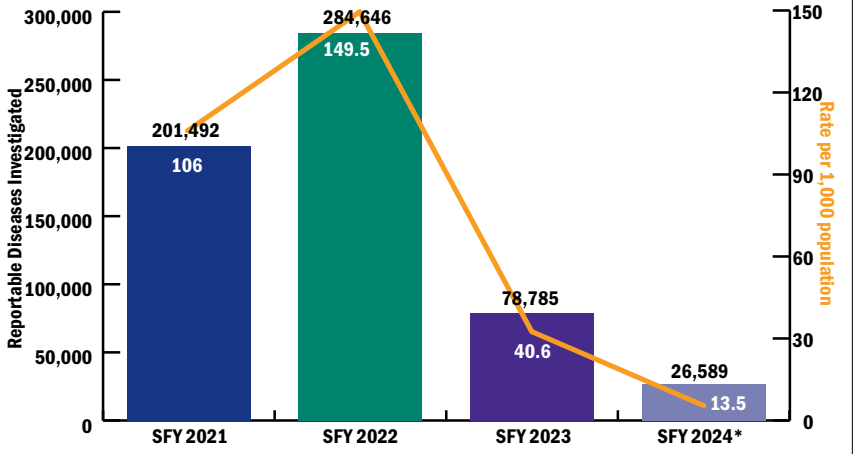
The disease investigation program assisted local public health districts in completing more than 4,300 investigations. It conducted records reviews and updated case report information for more than 1,500 additional investigations to improve data completeness and the accuracy of Idaho's epidemiologic data.

The healthcare-associated infection program completed 91 infection control assessment reviews for Idaho facilities, including long-term and acute care facilities and dialysis centers.

For additional information about reportable diseases in Idaho, visit: https://healthandwelfare.idaho.gov/providers/reportable-diseases/idaho-reportable-diseases.

For additional information about Infection Prevention and Control & Antibiotic Resistance and Antimicrobial Stewardship, visit: https://healthandwelfare.idaho.gov/providers/infection-prevention-and-control-antibiotic-resistance-and-antimicrobial-stewardship.

## REPORTABLE DISEASES




*SFY2024 data are provisional and subject to change

## DISEASE OUTBREAKS

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024* |
|---|---|---|---|---|
| Outbreaks declared | 43** | 58** | 104** | 138** |
| Idahoans impacted | 146 | 373 | 382 | 432 |
| Most common outbreak- associated pathogens | *Campylo-bacter*, Norovirus, *Salmonella*, Shiga toxin-producing *E. coli* | *Campylo-bacter*, *Salmonella*, Shiga toxin-producing *E. coli*, Influenza, Shigella | *Salmonella*, Influenza, Norovirus, *Campylobacter* | *Campylobacter*, *Salmonella*, Influenza, Norovirus, RSV |

* *SFY 2024 data are preliminary*

** *Outbreaks declared due to SARS-CoV-2 have been excluded from these numbers*

## FOODBORNE DISEASE OUTBREAKS INVESTIGATED

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024* |
|---|---|---|---|---|
| **Foodborne outbreaks** | 7 | 3 | 9 | 10 |
| **Licensed food establishments** | 2 | 1 | 2 | 3 |
| **Other sources/ venues** | 5 | 2 | 7 | 7 |
| **People Ill** | 45 | 144 | 24 | 42 |

*2024 data are provisional and subject to change

## BLOODBORNE DISEASES BY CALENDAR YEAR

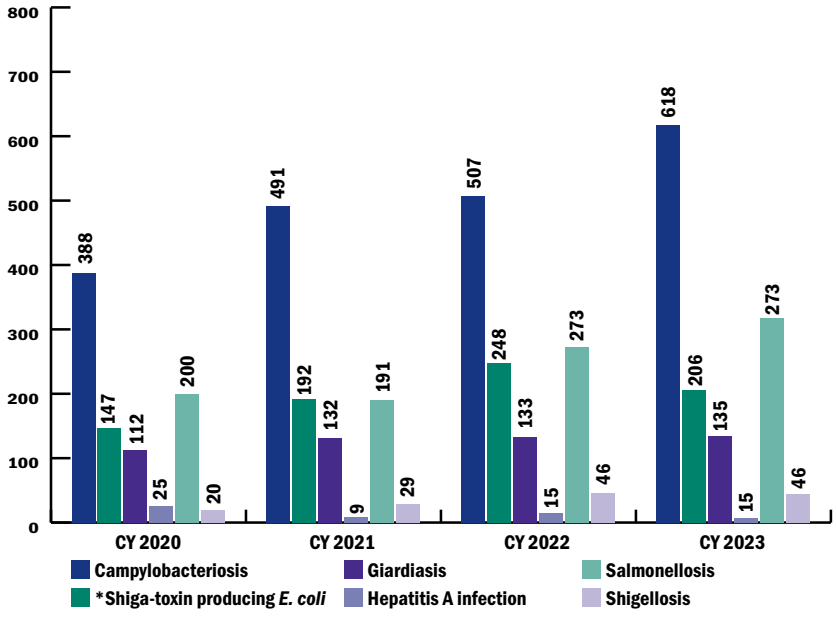
| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024* |
|---|---|---|---|---|
| **Bloodborne diseases** | 37 | 49 | 67 | 48 |
| **New HIV/AIDS** | 49 | 54 | 44 | 34 |
| **Idaho residents living with HIV/ AIDS** | 1,305 | 1,370 | 1,404 | 1,430 |
| **Acute Hepatitis B** | 2 | 2 | 2 | 1 |
| **Acute Hepatitis C** | 3 | 0 | 8 | 13 |

*SFY 2024 data are provisional and subject to change

## NUMBER OF CHILDHOOD VACCINE-PREVENTABLE DISEASES

| | 2020 | 2021 | 2022 | 2023 |
|---|---|---|---|---|
| **Haemophilus influenzae b (Hib), invasive** | 1 | 0 | 0 | 0 |
| **Measles** | 0 | 0 | 0 | 10 |
| **Mumps** | 1 | 2 | 2 | 4 |
| **Pertussis (whooping cough)** | 158 | 4 | 9 | 34 |
| **Rubella** | 0 | 0 | 0 | 0 |
| **Total** | 268 | 6 | 11 | 48 |

## ENTERIC DISEASES (DISEASES OF THE INTESTINE)




*Changed E. coli O157:H7 to all STEC in 2023 to match reporting on Get Healthy Idaho

## Environmental Health and Food Protection

The Environmental Health and Food Protection Section includes programs focused on improving the overall health and well-being of Idaho's communities by promoting healthy food, water, air, and indoor environments.

The Food Protection Program protects the public from foodborne illnesses by providing oversight, training, and guidance to environmental health specialists at Idaho's local public health districts. It is also responsible for ensuring compliance with laws regulating food safety. The program collaborates with the local public health districts and epidemiologists during foodborne illness investigations suspected to be linked to licensed food establishments.

During SFY 2024, 30% of foodborne disease outbreaks were associated with a licensed food establishment.

The Environmental Health Program is focused on health impacts of air, water, and indoor environments and includes toxicology, the childhood blood lead poisoning prevention program, and the indoor radon program. In addition, the program:

- Issues health advisories for water including fish consumption advisories and harmful algal blooms in recreational water
- Provides education about how to protect health when air quality is poor, such as during wildfire season, as well as about the health effects of poor indoor air quality from radon, carbon monoxide, lead, and mold
- Manages Idaho's clandestine drug lab clean-up program
- Educates the public about health impacts from former industrial and mining sites statewide

For additional information about the Food Protection Program, visit: https://healthandwelfare.idaho.gov/health-wellness/community-health/food-safety.

For additional information about the Environmental Health Program, visit: https://healthandwelfare.idaho.gov/health-wellness/environmental-health.

### LICENSED FOOD ESTABLISHMENTS IN IDAHO

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024* |
|---|---|---|---|---|
| **Total Licenses Issued** | 10,084 | 10,882 | 11,147 | 11,448 |
| **Complaints Against Licensees** | 569 | 513 | 623 | 534 |
| **Disciplinary Actions Against Licensees** | 2 | 2 | 4 | 8 |

**SFY 2024 data are preliminary*

## Immunization Program

The mission of the Idaho Immunization Program is to increase the immunization coverage of children in Idaho and prevent vaccine-preventable diseases. The program:

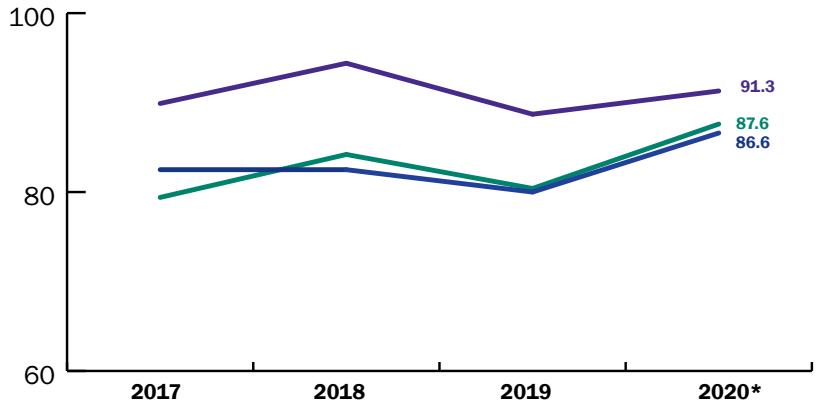
- Oversees the federally funded Vaccines for Children (VFC) Program, which provides vaccines for children who are: 1) eligible for Medicaid, 2) uninsured, 3) underinsured, or 4) American Indian or Alaskan Native.
- Conducts quality assurance, improvement, vaccine storage and handling, and education site visits with providers enrolled in the VFC program.
- Distributes vaccines to providers for free for all Idaho children from birth through age 18 to ensure access to recommended vaccines, regardless of ability to pay.
- Provides education and technical assistance to schools about the recommended childhood immunization schedule, school or childcare immunization rules, and protocols for vaccine-preventable disease outbreaks among children.
- Maintains Idaho's Immunization Reminder System (IRIS), a voluntary web-based immunization information system that provides healthcare providers, schools, and childcare facilities access to vaccine records for Idaho residents of all ages. IRIS provides clinical decision support to assist providers in keeping patients up to date on immunizations. IRIS also tracks inventory of vaccines distributed to providers.

- Maintains the Docket™ application to allow Idahoans easy access to their immunization records.

The Immunization Program provided technical assistance and support to more than 370 providers participating in the VFC program and over 55 COVID-19 Bridge Access Program providers. The program also managed more than 2.6 million immunization records within IRIS.

For additional information about the Idaho Immunization Program, visit: https://healthandwelfare.idaho.gov/services-programs/children-families/about-immunizations.

## IMMUNIZATION RATES FOR SELECT CHILDHOOD VACCINES




*2020 data are preliminary. Vaccination rates are based on the child's birth year (cohort).

## VACCINES DISTRIBUTED AND ADMINISTERED

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Vaccines Distributed** | 708,306 | 640,570 | 616,332* | 607,063** |
| **Vaccines Administered** | 688,474 | 811,321 | 674,595 | 598,086 |

*"Vaccines distributed" in the chart above are IIP-purchased vaccines. "Vaccines administered" is any vaccine administered and documented in IRIS, for children 18 years and younger.*

**Includes COVID-19 vaccines administered, but COVID-19 vaccine was distributed by the federal government and not included in vaccines distributed.*

***In SFY2024 this number includes influenza, COVID-19 (after it was commercialized in October 2023), and nirsevimab.*

## SCHOOL YEAR IMMUNIZATION RECORDS

| | 2020-21 | 2021-22 | 2022-23 | 2023-24 |
|---|---|---|---|---|
| **All required vaccines** | 76.2% | 74.3% | 71.69% | 70.7% |
| **Exempt >=1 vaccine** | 8.0% | 9.4% | 10.9% | 13.9% |
| **Conditionally admitted** | 1.1% | 2.0% | 1.36% | 1.1% |
| **Incomplete record** | 13.9% | 13.5% | 15.13% | 14.4% |
| **No record on file** | 0.8% | 0.8% | 0.91% | 0.8% |

*To meet school immunization requirements, student records must contain documentation of immunization status, including: 1) record of receiving required vaccines,2) a valid exemption, or 3) a conditional admittance certificate (student is scheduled to receive catch up vaccines). Incomplete or missing records do not meet school immunization requirements.*

## IDAHOANS ENROLLED IN REGISTRY BY AGE GROUP

| | SFY 2021 | SFY 2022 | SFY2023 | SFY2024 |
|---|---|---|---|---|
| **Ages 0-35 months** | 73,127 | 74,257 | 79,313 | 73,104 |
| **Ages 3-5 years** | 83,273 | 84,179 | 83,563 | 79,814 |
| **Ages 6-18 years** | 430,863 | 462,241 | 466,639 | 460,035 |
| **Ages > 18 years** | 1,327,006 | 1,830,729 | 1,930,274 | 2,003,831 |
| **Total** | 1,914,269 | 2,451,406 | 2,559,789 | 2,624,387 |

# BUREAU OF COMMUNITY HEALTH

The Bureau of Community Health promotes and protects the health of Idahoans by implementing evidence-based and best-practice programming to reduce risky behaviors and lower health risks; develops and implements programs to prevent and control chronic diseases; and promotes policies and strategies to create healthy communities. The bureau consists of the following programs:

- Tobacco Prevention and Control, known as Project Filter
- Breast and Cervical Cancer Early Detection Program, known as Women's Health Check
- Comprehensive Cancer Control
- Physical Activity and Nutrition
- Fit and Fall Proof Program
- Oral Health
- Diabetes, Heart Disease and Stroke Prevention
- Alzheimer's Disease and Related Dementias
- Sexual Violence Prevention
- Drug Overdose Prevention
- Refugee Health Screening Program
- Suicide Prevention

## Tobacco Prevention and Control Program (Project Filter)

The Tobacco Prevention and Control Program, known as Project Filter, fosters statewide coordination for successful tobacco control by:

- Preventing tobacco use among youth and young adults
- Promoting quitting tobacco to adults and youth
- Eliminating exposure to secondhand smoke

Project Filter partners with Idaho's seven local public health districts, tribes, and community-based organizations to eliminate tobacco use at the community level. Project Filter's activities prioritize three populations:

1. People with behavioral health conditions
2. Rural Idahoans
3. Youth and young adults

The nicotine landscape in Idaho includes the intersection of tobacco products, vaping, and emerging nicotine products that are becoming more popular among Idaho youth. Idaho parents report that 20% of their children between the ages 9-12, and 31% of their children ages 13-17 have tried vaping.

Project Filter funds the Idaho QuitLine, which provides easily accessible benefits to all Idaho residents who want to quit tobacco regardless of income or insurance status. These benefits include free counseling and nicotine replacement therapy (NRT) for up to eight weeks and free text, chat, or phone counseling for youth ages 13-17.

For additional information about the Tobacco Prevention and Control Program (Project Filter), visit: https://healthandwelfare.idaho.gov/services-programs/medicaid-health/womens-health-fit-fall-quit-smoking/tobacco-nicotine-and-vaping.

## Women's Health Check Program

The Women's Health Check Program offers free breast and cervical cancer screenings for low-income women. Qualifying women must be ages 21-64, have incomes below 200% of the federal poverty level, and have no insurance coverage for breast and cervical cancer screenings.

The program implements population-based approaches to improve systems that increase high-quality breast and cervical cancer screening. These include implementation of evidence-based interventions in health systems throughout the state, connecting and navigating patients to screening services, and informing policies to increase access to cancer screening.

More than 400 providers and clinics across the state provide screening under the Women's Health Check Program. From July 2023 through June 2024, the program screened 744 women for breast and/or cervical cancer. The program paid for441 mammograms and 381 Pap tests. The screenings resulted in the diagnosis of 11 women with cancer and 7 women with treatable precancerous conditions. All of the women were eligible for and received referrals to Medicaid for treatment.

For additional information about Women's Health Check, visit: https://healthandwelfare.idaho.gov/services-programs/medicaid-health/womens-health-fit-fall-quit-smoking/womens-health-check.

## Idaho Comprehensive Cancer Control Program

The Idaho Comprehensive Cancer Control Program works to reduce cancer in Idaho, where it is the second leading cause of death. In 2021, there were more than 9,972 new cases of cancer and 3,126 cancer deaths in the state. Nearly 80% of cancers are diagnosed in people ages 55 and older.

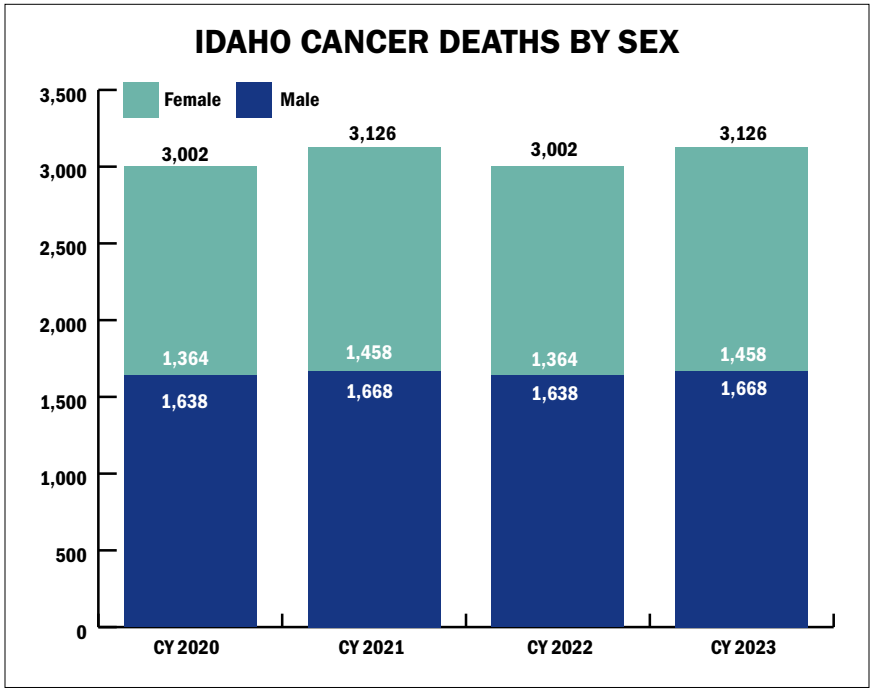
Cancer is caused by external factors such as tobacco use, exposure to chemicals, radiation, and infectious organisms, as well as by internal factors such as genetics, hormonal factors, and immune conditions. Many cancers are preventable, such as those caused by tobacco use and heavy alcohol consumption. Colorectal, breast, and cervical cancers have screening methods for early detection that make them highly treatable when detected early.

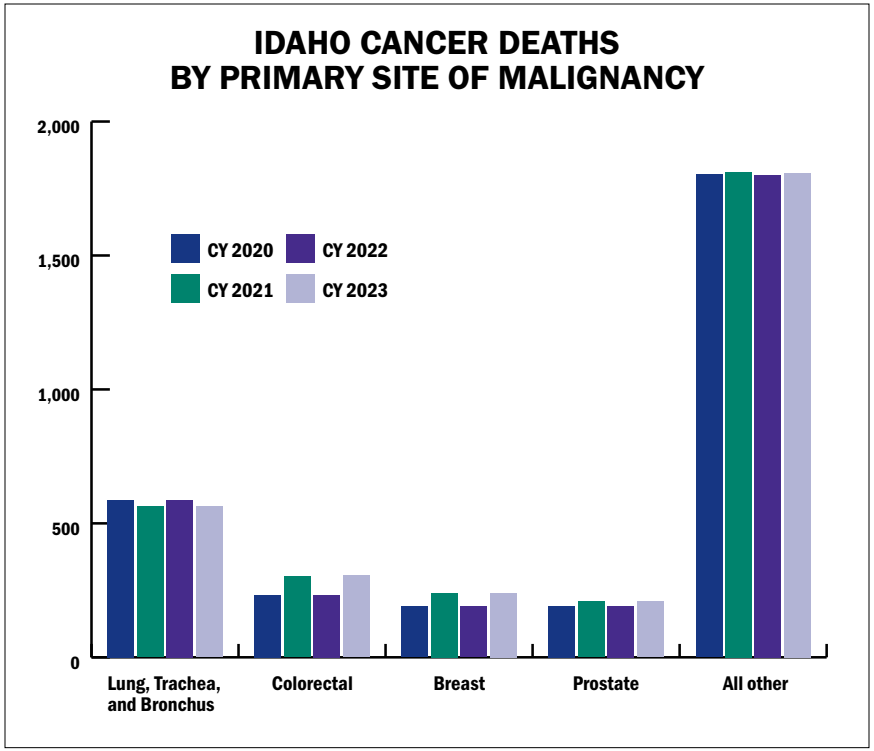
The goal of the Idaho Comprehensive Cancer Control Program is to maintain and expand a coordinated, effective, comprehensive cancer control program that:

- Defines the burden of cancer and related issues
- Develops new resources and networks with existing resources statewide
- Implements evidence-based strategies to reduce the burden of cancer and improve the quality of life for people who have cancer or are in recovery
- Increases awareness of preventive behaviors to decrease likelihood of cancer diagnosis
- Increases awareness of the importance of early detection and diagnosis, which leads to improved cancer screening rates

For additional information about the Idaho Comprehensive Cancer Control Program, visit: https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/about-comprehensive-cancer-control-program.

For additional information about how common cancer is in Idaho, visit the Cancer Data Registry of Idaho at https://www.idcancer.org/.






## Physical Activity and Nutrition Program

The Idaho Physical Activity and Nutrition Program encourages and enables all Idahoans to be physically active and make healthy food choices. The program promotes these ideals by enhancing education and awareness, supporting successful community programs and practices, and encouraging community designs and public policies that take residents' health into account.

The program works in diverse settings across Idaho, including childcare centers, farmer's markets, and environmental community design to support healthy choices in environments that promote good health. In SFY 2024, the program supported access to healthy local foods through funding various partnerships. For example, the program funded the University of Idaho Extension Office to enroll childcare providers in the Idaho Farm to Early Care Education program. This program provided education and access to local food sourcing to improve nutrition and physical activity for children ages 3-11.

The program subgrants with the Idaho public health districts to provide technical assistance and education to community leaders on livable communities, age-appropriate parks, and playground improvements to increase physical activity.

For additional information about the Idaho Physical Activity and Nutrition Program, visit: https://healthandwelfare.idaho.gov/health-wellness/community-health/physical-activity-and-nutrition.

## Fit and Fall Proof®

Fit and Fall Proof® is a community-based exercise program for older adults. The program focuses on improving balance, strength, flexibility, and mobility to reduce the risk and severity of falls and to increase participants' emotional and social well-being.

Falls are the number one accidental injury in Idaho, above car crashes, and adults 65 years and older are the most susceptible. As Idaho's population over 65 years of age grows, the need for effective community-based programs that promote healthy living and "aging in place" will continue to increase.

Fit and Fall Proof® funds a core master trainer and provides funding to the public health districts to implement the program around the state. The public health districts have coordinators who are trained as master leaders and provide support to the local volunteer leaders. Trained volunteer peer leaders offer classes in churches, libraries, senior centers, community recreation centers, and other places seniors gather.

The public health districts promote the program by presenting to community groups and stakeholders to generate interest, recruit new volunteer leaders, and increase the number of participants. From October 2023 to June 2024, 8,321 participants attended Fit and Fall Proof® classes. This is 1,577 more participants than during this timeframe in SFY 2023, a 23% increase. The program consistently has a high retention rate, with 91% of participants returning for classes. In addition, many participants are from communities with a population of fewer than 10,000 residents, demonstrating the importance of the program in

Idaho's rural areas.

For additional information about Fit and Fall Proof™, visit: https://healthandwelfare.idaho.gov/services-programs/medicaid-health/womens-health-fit-fall-quit-smoking/fit-and-fall-proof-tm.

## Oral Health Program

The Idaho Oral Health Program (IOHP) is the primary source for oral health monitoring and community-based oral disease prevention programs in the state. Oral health is essential to quality of life. It is fundamental to all Idahoans in the quest to achieve overall health and well-being and serves as an important predictor for the general health of our population.

The IOHP was established in 1951 and continues to create strong stakeholder partnerships that lead to improved oral health for Idaho residents. The program analyzes state and community data to inform program decisions and monitor trends related to the oral health of Idahoans. It offers infrastructure and essential resources to support, create, implement, and evaluate oral health initiatives and policies. Some of the program's accomplishments in the past year include:

- Worked with the Idaho Oral Health Alliance to complete the 2023 Annual Report showcasing partners' activities contributing to the oral health goals and objectives of the 2021-2026 Idaho Oral Health Improvement Plan
- Funded public health districts to provide oral health education, fluoride varnish clinics (7,228 fluoride varnish applications placed), and school-based dental sealant clinics (5,667 dental sealants placed)
- Funded three subgrants to expand access to oral healthcare for Idahoans in Dental Health Professional Shortage Areas. The subgrants led to 228 teledentistry visits and enabled oral diagnostic services to 678 underserved individuals. Additionally, 60 nursing students received training to perform oral screenings under the supervision of a licensed Idaho provider.
- Partnered with the public health districts and Delta Dental of Idaho to conduct the Idaho Smile Survey. The survey included 1,678 third-grade students. Nearly one in five students had active dental decay at the time of the survey and six out of 10 children have experienced at least one cavity.

For additional information about the Idaho Oral Health Program, visit: https://healthandwelfare.idaho.gov/health-wellness/healthy-infants-children/oral-health.

## Diabetes, Heart Disease, and Stroke Prevention Program

The Idaho Diabetes, Heart Disease, and Stroke Prevention Program supports the prevention and management of diabetes and cardiovascular disease through assessment and evaluation, strong partnerships, and sustainable implementation of evidence-based interventions and programs.

These conditions are major contributors to disease burden in Idaho. More than 146,844, nearly 10% of Idaho adults, were living with diabetes in 2023. Heart disease is the second leading cause of death in Idaho, with 3,287 Idahoans dying from heart disease in 2023. Another 805 Idahoans died from a stroke in 2023.

The program supports a statewide network of partners, including local public health districts, health systems, community-based programs, state associations, and others to:

- Establish new or expand existing Diabetes Self-Management Education and Support programs and Live in Control programs
- Establish new or expand existing national diabetes prevention programs for people with prediabetes
- Increase community clinical connections that support systematic referrals, self-management, and lifestyle changes for patients with high blood pressure and high blood cholesterol

The program's accomplishments from the past year include:

- Establishing two new diabetes support programs serving 16 counties in south-central and eastern Idaho
- Partnering with local clinics and organizations to support over 100 Idahoans participating in Diabetes Self-Management Education and Support programs

For additional information about the program's work relating to prediabetes, visit https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/prediabetes.

For additional information about the program's work relating to diabetes, visit https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/diabetes.

For additional information about the program's work relating to heart disease, visit https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/heart-disease.

## Alzheimer's Disease and Related Dementias Program

The Alzheimer's Disease and Related Dementias (ADRD) Program brings Idahoans together to increase awareness of Alzheimer's, dementias, and the value of early detection. The program also addresses the modifiable risk factors that impact brain health.

More than 30,000 Idahoans have Alzheimer's, and they have 66,000 family members caring for them. Of Idahoans 45 years and older, 10.8% reported subjective cognitive decline in 2022, and 78.5% said it has created functional difficulties with day-to-day activities and work. Yet, 45% of dementia can be delayed through a public health approach. The ADRD Program's approach focuses on:

- Equipping Idahoans with the tools they need to improve brain health and reduce the risk of dementia or delay it through early lifestyle choices and prevention of chronic conditions
- Educating Idahoans about the benefits of early detection, brain health conversations with a healthcare provider, proper management of chronic conditions, early family caregiver identification, living well with dementia, and end-of-life planning
- Increasing awareness about support and services for people with dementia and their family caregivers and working toward a more dementia-friendly Idaho

The program is also working to equip, educate, and raise healthcare professionals' awareness of interventions to improve care, decrease emergency department visits, and reduce hospital readmission rates.

Program accomplishments include:

- Funded another year of Project ECHO ADRD education sessions through the University of Idaho, increasing healthcare professional attendance by 62% and launched the ADRD Provider webpage at https://healthandwelfare.idaho.gov/providers/brain-health-alzheimers-dementia-family-caregivers-across-lifespan-providers/brain-health.
- Continued support for seven statewide Goal Teams who track progress on activities outlined in the 2023-2028 ADRD Strategic Plan for Idaho

- Recruited more than 514 dementia friends (someone who learns what it's like to live with dementia and then turns that understanding into action) through the Dementia Friends Idaho Program
- Distributed more than 2,286 workbooks for family caregivers

For additional information about the ADRD Program, visit: https://healthandwelfare.idaho.gov/health-wellness/diseases-conditions/alzheimers-disease-and-related-dementias.

## Sexual Violence Prevention Program

The Sexual Violence Prevention Program (SVP) aims to prevent sexual violence in Idaho by preventing first-time occurrences of sexual violence; reducing risk factors and enhancing protective factors linked to sexual violence; and analyzing state and community data, such as health and safety data, to inform program decisions and monitor trends. Some recently funded activities include:

- Expanding healthy relationship education resources through the Prevention Hub. The website (https://www.wcaboise.org/worth/) serves as a resource across the state to expand education, build skills, and prevent violence. It provides prevention podcasts, videos, and resources for parents, teachers, and people working with teens and young adults.
- Supporting direct victim assistance, case management, and a crisis hotline for victims of human trafficking. With SVP funds, the crisis line addressed about 1,836 calls and texts in between October 2023 and June 2024.

For additional information about the Sexual Violence Prevention Program, visit: https://healthandwelfare.idaho.gov/health-wellness/community-health/sexual-violence-prevention.

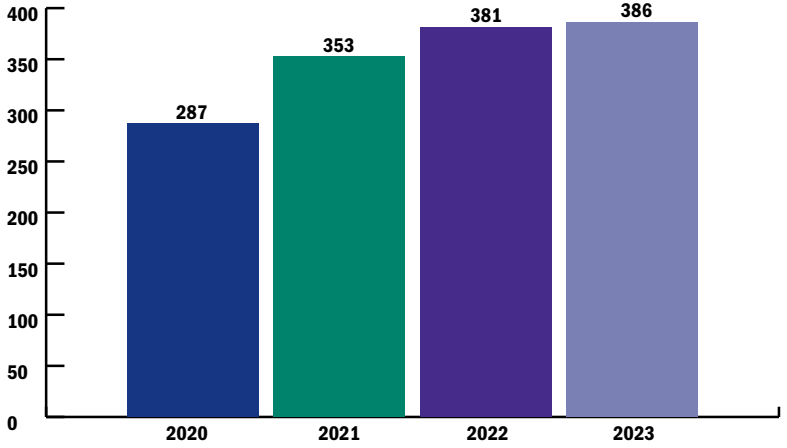
## Drug Overdose Prevention Program

The Drug Overdose Prevention Program was established in 2017 and has worked collaboratively with its partnering agencies and stakeholders to address the evolving opioid crisis. Idaho has experienced steadily increasing numbers of drug-overdose deaths. From 2017 to 2023, 2,161 Idaho residents died from a drug overdose. From 2020 to 2023, there was a 34.5% increase in drug overdose deaths, and fentanyl-related overdose deaths increased 337% in Idaho. The Drug Overdose Prevention Program delivers public health prevention approaches to address the drug crisis, including:

- Educating prescribers on the Centers for Disease Control and Prevention guidelines for opioid prescribing and promoting use of the Idaho Prescription Drug Monitoring Program
- Funding local public health initiatives among Idaho's public health districts and tribes such as overdose prevention and response trainings, prescription drug take-back events, and healthcare provider education
- Collaborating with public safety agencies to improve overdose data collection, expand access to naloxone, and link overdose patients to care
- Increasing public awareness and knowledge about the dangers of illicitly manufactured fentanyl and the availability of naloxone, the medication that reverses opioid overdoses
- Collecting and analyzing data to monitor the drug crisis and measure programmatic impacts

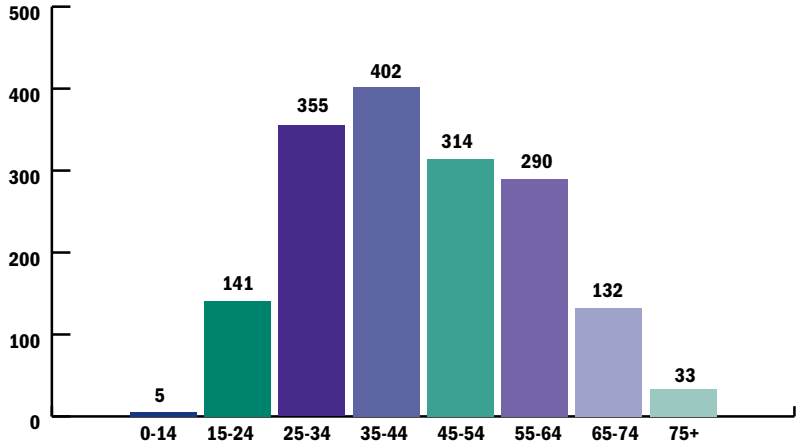
To learn more about the Drug Overdose Prevention Program, visit https://healthandwelfare.idaho.gov/services-programs/behavioral-health/about-opioids.

## IDAHO RESIDENT DRUG OVERDOSE[1] DEATHS




[1]*Drug overdose: the underlying cause of death was acute poisoning by drugs in which the manner of death was accident, suicide, homicide or undetermined intent. Drug overdose deaths are a subset of drug-induced deaths and exclude illness, disorders, and diseases resulting from long-term or chronic drug use. This classification is also referred to as drug poisoning.*

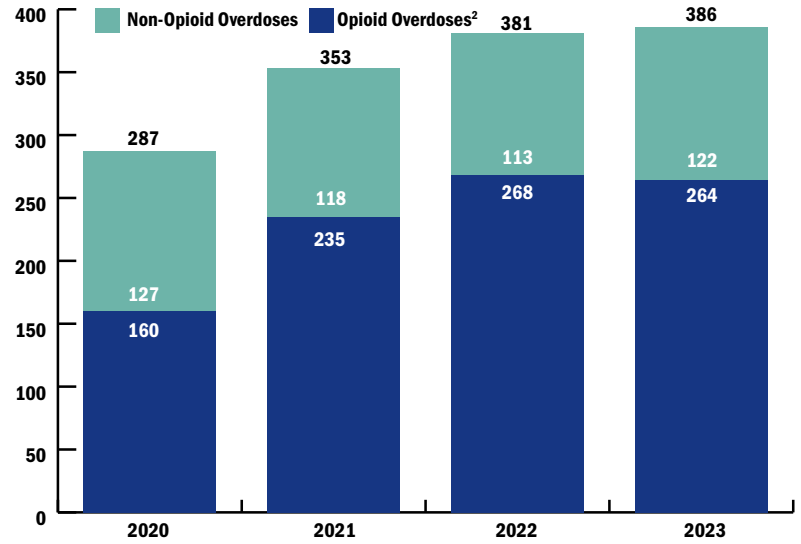
## DRUG OVERDOSE[1] DEATHS BY AGE GROUPS, 2019-2023 (FIVE YEAR AGGREGATE)




[1]*Drug overdose: the underlying cause of death was acute poisoning by drugs in which the manner of death was accident, suicide, homicide or undetermined intent. Drug overdose deaths are a subset of drug-induced deaths and exclude illness, disorders, and diseases resulting from long-term or chronic drug use. This classification is also referred to as drug poisoning.*



## IDAHO RESIDENT DRUG OVERDOSE[1] DEATHS




[1]*Drug overdose: the underlying cause of death was acute poisoning by drugs in which the manner of death was accident, suicide, homicide or undetermined intent. Drug overdose deaths are a subset of drug-induced deaths and exclude illness, disorders, and diseases resulting from long-term or chronic drug use. This classification is also referred to as drug poisoning.*

[2]*Any opioid (T40.0, T40.1, T40.2, T40.3, T40.4, T40.6)*

*Drug overdose deaths are a subset of rankable causes of mortality, and are not ranked for leading causes of mortality.*

*Source: Bureau of Vital Records and Health Statistics; Division of Public Health (Issued: August 2024).*

## Refugee Health Screening Program

The Refugee Health Screening Program ensures that refugees who resettle in Idaho receive a timely health screening and necessary follow-up care. More than 1,000 refugees arrived in Idaho in Federal Fiscal Year (FFY) 2024, down from 1,200 in FFY 2022 and 2023. In FFY 2024, 47% of arrivals were younger than 18 years of age, and 53% were 18 years or older. Most of them arrived from Ukraine, Democratic Republic of Congo (DRC), and Afghanistan. Refugee arrivals for FFY 2025 are expected to surpass 900, with most continuing to be from Ukraine, DRC and Afghanistan. Refugee new arrivals complete a comprehensive health screening, within 90 days of their arrival in Idaho.

The program works with providers and resettlement agencies in the state to make sure refugees receive a timely and complete

health assessment, a referral for follow-up care when health conditions are identified, and the skills to navigate the Idaho healthcare system.

The program also engages partners such as the Idaho Office for Refugees, resettlement agencies and non-profit organizations in Idaho to ensure newly arrived refugees are provided the resources and assistance necessary to become integrated and contributing members of Idaho communities.

For example, the program funds the refugee Community Advisor Program. This program employs more than 20 refugee peers who have successfully resettled in Idaho and matches them with new refugee arrivals to teach them skills necessary to navigate the Idaho healthcare system and access social services, as needed. On average, about 150 refugees per month receive direct health navigation support through this program.

For additional information about refugee health screening, visit: https://https://www.cdc.gov/immigrant-refugee-health/hcp/domestic-guidance/index.html#:~:text=The%20domestic%20medical%20screening%20guidance,arrives%20in%20the%20United%20States.

**REFUGEE ARRIVALS SCREENED IN FEDERAL FISCAL YEAR 2023**

| Gender | Number screened <18 years of age (n=388) | Number screened >18 years of age (n=391) | Total (N=779) |
|---|---|---|---|
| **Female** | 190 | 197 | 387 |
| **Male** | 198 | 194 | 392 |

*Note: Refugees who arrived at the end of the federal fiscal year would not be screened until the next federal year.*

## Suicide Prevention Program

The Suicide Prevention Program works across the state to galvanize efforts to interrupt suicide, change stigma, and connect resources to those experiencing a suicidal crisis or recovering from the loss caused by suicide.

Idaho's suicide rate in 2022, the latest year for comparable national data, rose to 22.7%. Compared to other states, that rate was the fifth highest in the nation. Suicide remains a critical public health issue in Idaho, and ongoing statewide collaboration is necessary to reduce suicide risk.

The program focuses prevention efforts on several populations at higher risk of suicide including youth, rural and tribal populations, veterans, and several other high-risk groups. During the most recent five-year period for which data is available (2018-2022), a total of 2,032 Idahoans died by suicide. In 2022, there were 441 suicides in Idaho, 35 of which were youths. Suicide was the second leading cause of death for Idaho youth younger than age 20. Among all age groups, the Idaho suicide rate for males was four times higher than for females.

The program fosters connections between community partners through multiple approaches, including awarding subgrants to the state Department of Education, each of Idaho's seven local public health districts, and providing funding to support the 988 Idaho Crisis and Suicide Hotline. In SFY 2024, the Suicide Prevention Program sponsored continued healthcare agency training through the SafeSide Prevention Institute. The program also supported three additional Idaho healthcare organizations to implement a Zero Suicide care framework in at least one of their clinical settings. Zero Suicide projects are designed to change organizational culture and intercept suicide at the doors of healthcare.

To learn more about the Suicide Prevention Program, visit https://healthandwelfare.idaho.gov/services-programs/behavioral-health/about-suicide-prevention.

## NUMBER OF COMPLETED SUICIDES BY AGE

| | <=14 | 15-19 | 20-64 | 65+ | TOTAL |
|---|---|---|---|---|---|
| **CY 2022** | 12 | 23 | 310 | 96 | 441 |
| **CY 2021** | 10 | 24 | 294 | 59 | 387 |
| **CY 2020** | 4 | 32 | 314 | 71 | 421 |
| **CY 2019** | 8 | 19 | 255 | 83 | 365 |

## RATE OF COMPLETED SUICIDES BY AGE (PER 100,000 POPULATION)

| | <=14 | 15-19 | 20-64 | 65+ | TOTAL |
|---|---|---|---|---|---|
| **CY 2022** | 3.4 | 15.7 | 28.4 | 27.1 | 22.7 |
| **CY 2021** | 2.6 | 17.8 | 27.6 | 18.7 | 20.4 |
| **CY 2020** | 1.0 | 25.2 | 30.7 | 23.2 | 23.0 |
| **CY 2019** | 2.2 | 15.2 | 25.5 | 28.6 | 20.4 |

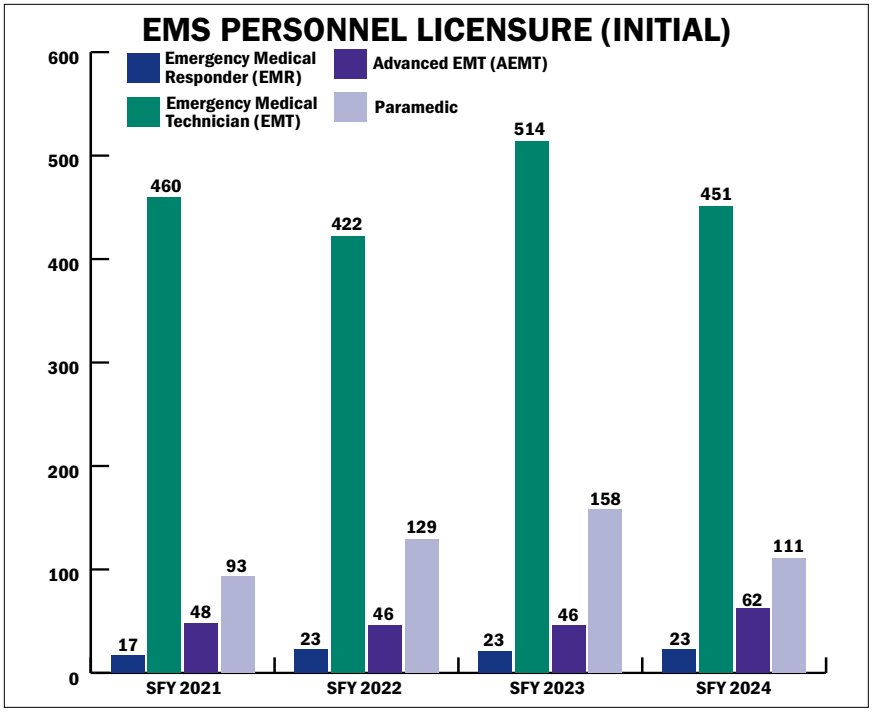
*Source: Bureau Vital Records and Health Statistics, Idaho Department of Health & Welfare, August 2023*

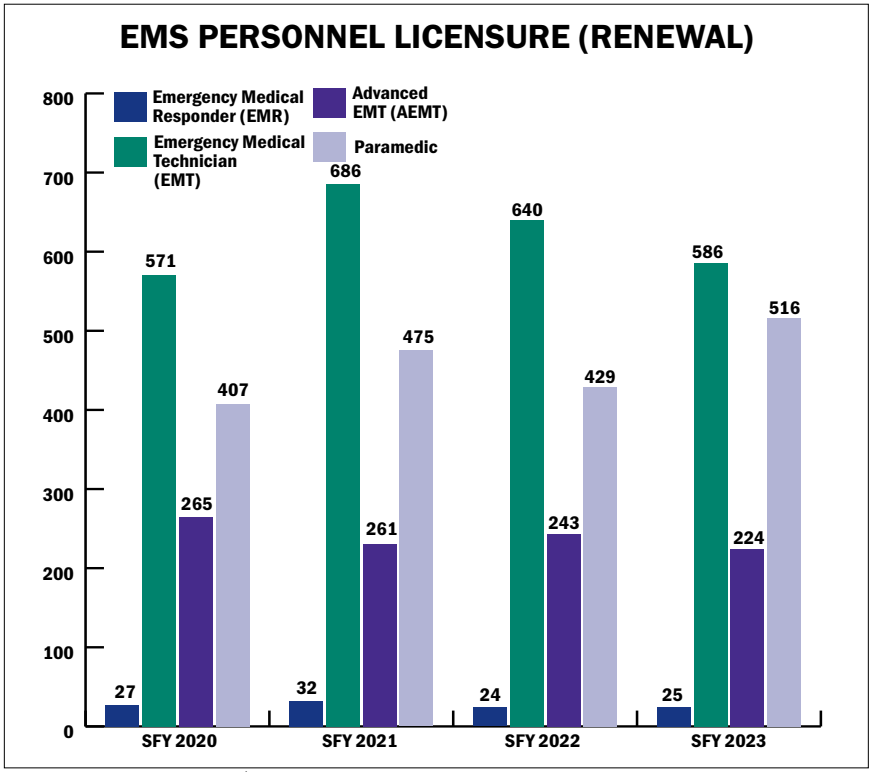
# BUREAU OF EMERGENCY MEDICAL SERVICES AND PREPAREDNESS

The Bureau of Emergency Medical Services (EMS) and Preparedness supports the statewide system of responding to critical illness and injury situations.

The bureau operates the following programs:

- EMS State Communications Center
- Strategy, Quality, and Innovation Program
- Emergency Medical Services
- Time Sensitive Emergencies Systems of Care
- Emergency Medical Services Agency Vehicle and Equipment Grant
- Emergency Medical Services for Children Program
- Public Health Preparedness and Response Program



## Idaho State EMS Communications Center

The Idaho State EMS Communications Center (StateComm) is a 24/7/365-day-a-year public health communications resource and dispatch center. StateComm provides full-time EMS dispatch for nine rural EMS agencies, pre-arrival medical instructions to callers until EMS arrives on scene, and mass casualty EMS coordination.

StateComm is also the notification and coordination point for the Idaho National Laboratories, as well as railway, dam, and logging emergencies. It is also the primary notification point for the Emergency Alert System (civil emergencies and AMBER, Endangered Missing Persons and Blue Alerts) and the National Alert Warning System.

StateComm provides dispatch services for the Idaho Department of Transportation, including notifications for road closures, highway incidents, Dynamic Message Sign activation, Condition Acquisition Reporting System, and 511 data entry.

In addition, StateComm coordinates hazardous material response, critical incident stress management, and prehospital death tissue referral across the state.

You can learn more about StateComm at: https://healthandwelfare.idaho.gov/providers/emergency-medical-services-ems/state-comm.

| Incident Call Volume | Total SFY2023-2024 |
|---|---|
| Airmed | 1603 |
| AMBER Alert | 3 |
| Healthcare Bridge Call | 5 |
| CISM | 9 |
| EMS Ground and Air Dispatch | 2081 |
| Dynamic Message Sign | 823 |
| Flight Following | 160 |
| Hazmat | 284 |
| ITD Highway | 7368 |
| ITD Log | 23777 |
| Master Log | 2141 |
| Misc | 81 |
| Paging | 134 |
| Public Drinking Water | 3 |
| Rail | 66 |
| ITD Road Closure | 79 |
| ITD Traffic Sign | 420 |
| ITD Traffic Signal | 455 |
| Pager/Radio Tests | 1848 |
| Emergency Medical Dispatch | 420 |

## Strategy, Quality, and Innovation Program

The Strategy, Quality, and Innovation (SQI) Program is primarily responsible for serving the bureau as a collaborating and innovating body. Program staff work closely with all the other programs in the bureau by assisting, supporting, and connecting programs through policy development, project management, business process and system improvement, data analytics, performance management, strategic planning, budget and grant management, and system development and administration.

## Emergency Medical Services Program

The EMS Program is responsible for assistance and oversight of EMS agencies, personnel, and education in Idaho. The program provides customer service and technical assistance to EMS personnel and agency representatives with licensing, patient care reporting, systems navigation, rule interpretation, policy development, and EMS data research.

The program is responsible for issuing personnel and agency licenses; approving EMS education programs, instructor certifications, EMS training courses and exams; and maintaining the records of EMS personnel and agencies throughout the state. The program also offers technical assistance to EMS agencies experiencing operational problems and investigates EMS complaints and alleged violations of Idaho Statutes and/or Administrative Code (IDAPA) related to Emergency Medical Services.

### EMS AGENCY LICENSURE (RENEWAL)

| SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|
| 179 | 178 | 161 | 186 |

### EMS AGENCY LICENSURE (INITIAL)

| SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|
| 8 | 11 | 11 | 10 |

## EMS Sustainability Task Force (EMSSTF)

The challenges facing the volunteer EMS agencies on which most rural Idaho communities rely are a major focus of the EMS and Strategy, Quality, and Innovation programs. The EMS Sustainability Task Force was formed in June 2022, in response to the Office of Performance and Evaluation's reports on EMS in Idaho, to seek solutions to the challenges facing those who provide emergency medical response throughout Idaho.

Additional information about the EMS Sustainability Task Force is available at: https://healthandwelfare.idaho.gov/about-dhw/boards-councils-committees/emergency-medical-services-sustainability-task-force-emsstf.

Additional information about the EMS Program is available at: https://healthandwelfare.idaho.gov/providers/emergency-medical-services-ems/emergency-medical-system-ems-providers.

## EMS Grants:

Emergency Medical Services Agency Vehicle and Equipment Grant Program (EMSAVE)

This grant program is funded by Idaho driver's license fees and provides about $1.7 million in grants to eligible Idaho-licensed EMS agencies each year. To be eligible for funding, an Idaho EMS agency must hold a current Idaho EMS agency license, have the primary responsibility of responding to 911 calls, be a non-profit or governmental entity, and demonstrate a financial need for grant funding. For the SFY 2024 grant cycle, the program provided funding for seven emergency vehicles and additionally awarded funding to 44 EMS agencies for equipment.

Additional information about this grant program is available at: https://healthandwelfare.idaho.gov/providers/emergency-medical-services-ems/ems-news-resources.

### EMS AGENCY VEHICLE AND EQUIPMENT (EMSAVE) GRANT

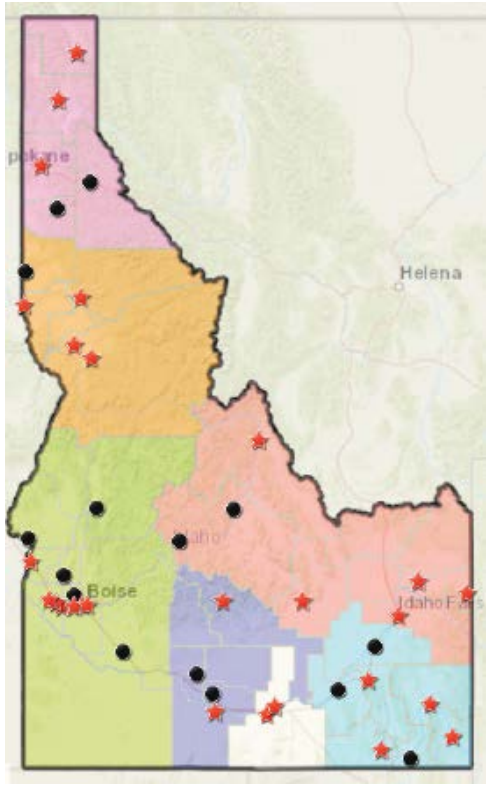
| | SFY2021 | SFY2022 | SFY2023 | SFY2024 |
|---|---|---|---|---|
| **Grant Requests** | 2.5M | 5.9M | 5.99M | 3.18M |
| **Grants Awarded** | 1.7M | 1.7M | 1.7M | 1.7M |
| **Vehicle Requests** | 14 | 30 | 30 | 14 |
| **Patient Care Equipment** | 76 | 112 | 68 | 83 |
| **Agencies Applying** | 55 | 64 | 62 | 50 |
| **Agencies Awarded** | 47 | 52 | 53 | 46 |

## Time Sensitive Emergencies Program

The Time Sensitive Emergencies (TSE) Program provides leadership, administrative support, and technical assistance to the statewide TSE System. TSE includes three of the top five causes of deaths in Idaho: trauma, stroke, and heart attack. Studies show organized systems of care improve patient outcomes, reduce the frequency of preventable deaths, and improve the quality of life for patients.

TSE addresses public education and prevention, 911 access, pre-hospital response coordination, transport, hospital emergency/acute care, and quality improvement. The statewide program is working to create a seamless transition between each level of care and integrate existing community resources to improve patient outcomes and reduce costs.

The goal is to get the patient to the right place in the right time with the right care. TSE designates healthcare facilities as trauma, stroke, and/or heart attack centers based on the facility's capabilities. There are 61 different designations. Seventy percent of the 45 eligible facilities in Idaho hold one or more designation.




Additional information about the Time Sensitive Emergency System is available at: https://healthandwelfare.idaho.gov/providers/time-sensitive-emergency.

## TSE DESIGNATIONS OFFERED

| | |
|---|---|
| **Level I Trauma Center** | Comprehensive trauma care and partnership with a medical school |
| **Level II Trauma Center** | Comprehensive trauma care |
| **Level III Trauma Center** | Emergent trauma care with basic OR services |
| **Level IV Trauma Center** | Emergent trauma care; typically without basic OR services |
| **Level V Trauma center** | Stabilization and transfer of trauma patients |
| | |
| **Level I Stroke Center** | Comprehensive stroke center |
| **Level II+ Stroke Center** | Primary stroke care plus mechanical thrombectomy capable |
| **Level II Stroke Center** | Primary stroke care |
| **Level III Stroke center** | Stabilization and transfer of stroke patients |
| | |
| **Level I+ STEMI Center** | Comprehensive STEMI care plus cardiogenic shock capable |
| **Level I STEMI Center** | Comprehensive STEMI care; able to perform PCI |
| **Level II STEMI Center** | Stabilization and transfer of STEMI patients |

## TSE EMS DESIGNATIONS

| | |
|---|---|
| TSE Advanced Life Support Agency | 2 |
| TSE Intermediate Life Support Agency | 1 |
| TSE Basic Life Support Agency | 0 |
| **Total** | **3** |

## Emergency Medical Services for Children Program

The Emergency Medical Services for Children (EMSC) Program seeks to reduce pediatric mortality and morbidity due to severe illness or trauma by ensuring that high quality emergency care is provided to all children in Idaho. EMSC provides education, data, resources, and injury prevention to providers across the state. The program accomplishes this by funding emergency medicine conferences, simulation trainings and educational courses, and quarterly newsletters and data cards.

In SFY 2024, the program began the Pediatric Readiness Hospital Recognition program for hospital emergency departments in January 2024. This program has three tiers and is voluntary and free to all hospitals with an emergency department. Two hospitals have been recognized, with multiple hospitals in the process of applying. EMSC continues to provide education to make sure agencies and facilities have the opportunity to enhance their skills and the confidence to care for pediatric patients.

In SFY 2025, EMSC will continue developing a prehospital pediatric readiness recognition program to recognize EMS agencies that are ready to care for pediatric patients.

Additional information about the Emergency Medical Services for Children Program is available at: https://healthandwelfare.idaho.gov/providers/idaho-time-sensitive-emergency/ems-children-program.

## Public Health Preparedness and Response Section

The Public Health Preparedness and Response Section prepares Idaho's state and local public health districts to respond to and recover from emergencies. The section's goal is to enhance readiness to save lives and prevent morbidity and mortality during emergencies that exceed the day-to-day capacity of public health agencies and healthcare systems for a range of threats, including infectious diseases, natural disasters, and biological, chemical, nuclear, and radiological events.

The Preparedness and Response Section manages emergency plans, maintains workforce readiness through training and exercises, monitors potential health and safety threats, and evaluates the need for incident management team activation during public health emergencies.

One of the many focus areas related to readiness and response is assisting people with access and functional needs who live independently in their homes, who rely on essential health services and electricity-dependent durable medical and assistive equipment and devices. Prolonged power outages can rapidly put these people into life-threatening situations. In 2022-2023, two public health districts requested emPOWER datasets during a long-term power outage and wildfire response. First responders used that data to conduct life-saving assistance and outreach to those people.

## Public Health Emergency Preparedness Program

The Public Health Emergency Preparedness Program Cooperative Agreement is funded by the national Centers for Disease Control and Prevention. This funding supports personnel from three bureaus in the Division of Public Health: Bureau of Emergency Medical Services and Preparedness, Bureau of Environmental Health and Communicable Disease, and the Idaho Bureau of Laboratories. In SFY 2024, Idaho received $5.4 million.

Domains of public health emergency preparedness include:

- **Biosurveillance —** Monitoring and investigating health threats
- **Community resilience —** Preparing for emergencies and recovering after they occur
- **Incident management —** Coordinating emergency response
- **Information management —** Sharing important information so people can take appropriate action
- **Countermeasures and mitigation —** Delivering medical care and supplies where they're needed
- **Surge management —** Preparing for expansion of services to accommodate large-scale events

## Healthcare Preparedness Program

The Healthcare Preparedness Program Cooperative Agreement is funded by the Administration for Strategic Preparedness and Response. Funding through the cooperative agreement supports:

- Personnel in the Public Health Preparedness and Response Section
- Three regional healthcare coalitions in the state that operate collaboratively as healthcare delivery systems
- A technological platform for federally mandated healthcare capacity reporting by Idaho hospitals

The program requires each coalition to have at least four core members representing the following organizations: public health, hospitals, EMS agencies, and emergency management. Each coalition updates their governing documents and response plans; elects a chairperson; and is required to have a regional readiness and response coordinator and a clinical advisor. The regional readiness and response coordinators are the primary contacts between local healthcare partners, local public health districts, and Department of Health and Welfare. They serve as core coalition members and support incident management activities associated with Emergency Support Function 8, Public Health and Medical Services.

The healthcare preparedness program consists of four healthcare preparedness capabilities and nine newly released core functions.

The capabilities are:

- Foundation for Healthcare and Medical Readiness
- Healthcare and Medical Response Coordination
- Continuity of Healthcare Service Delivery
- Medical Surge

The core functions are:

- Assessment and risk mitigation: Anticipate challenges and mitigate risks to support decision-making that meets community or jurisdiction health care needs during a disaster or emergency
- Information sharing: Collect and share near real-time information to provide healthcare situational awareness during an emergency or disaster
- Specialty care planning and coordination: Incorporate necessary expertise to support health care readiness planning, disaster and incident management, including for specialty care delivery, and to address specific hazards or events
- Respond: Coordinate and support the implementation of plans, policies, and procedures among state recipients, healthcare coalition members, and their partners to address patient care needs during an emergency or disaster
- Health care workforce support: Equip, protect, and support the healthcare workforce by providing access to healthcare readiness resources, training, and exercises

- Resource management: Facilitate resource management and planning among state recipients, healthcare coalition members, and their partners to mitigate shortfalls, maintain operations, and sustain delivery of patient care services during an emergency or disaster
- Training, exercise, and evaluation: Conduct trainings, exercises, and evaluations that incorporate input from assessments, plans, policies, and previous trainings and exercises to evaluate, validate, and improve readiness and response processes
- Continuity and recovery: Support the improvement of processes and systems that promote continuity of healthcare operations and aid in recovery
- Organizational development: Create and carry out strategies to sustain and grow healthcare coalitions and their partnerships

The three coalitions are as follows:

- Northern Idaho Health Care Coalition
- Western Idaho Health Care Coalition
- Greater Idaho Health Care Coalition

In SFY 2024, Idaho received $1.4million in funding, and $900,000 was distributed to the healthcare coalitions. In 2024, Idaho's Healthcare Preparedness Program also funded two projects related specifically to Idaho's youth. The first project was working with Idaho's EMS for Children program to fund 288 Carter Kits™ Sensory Bags. The sensory kits were distributed by EMSC to Idaho EMS agencies, hospitals, and schools and contained clinically proven items known to comfort and appropriately focus children who are on the autism spectrum, as well as many other children who occasionally find themselves overwhelmed or otherwise impacted by traumatic events. The responders and local communities were able to implement the kits into their response equipment with a focus on helping children during times of need: https://carterkits.org/.

The second project was providing Family Reunification Training within the Greater Idaho Healthcare Coalition jurisdiction. The crisis response and post-crisis reunification training was open to all healthcare coalition partners statewide. Almost 70 individuals attended the two-day event. The first day was focused on a "Train the Trainer" style course about family reunification methods. The second day focused on a practice exercise using skills learned from the previous day. Participants included staff from EMS agencies, fire departments, and local sheriff's offices, local public health districts, hospitals, Office on Aging, U.S. Senator Mike Crapo's office, local emergency managers, schools, nursing homes, Idaho Department of Corrections, and Department of Health and Welfare.

Idaho Medical Operations Coordination Cell calls were facilitated by the Bureau of EMS and Preparedness with more than 44 hospitals from September 2021 to July 2024. Hospitals reported information about COVID-19 and respiratory patients, staffing and resource needs, and the number of beds available in each facility. Patient transfers were coordinated during the MOCC calls. The cadence of calls varied depending on the response need. Calls can occur daily, weekly, or monthly.

Additional information about the Public Health Preparedness and Response Section is located at: https://healthandwelfare.idaho.gov/health-wellness/emergency-planning/emergency-preparedness.

# IDAHO BUREAU OF LABORATORIES

The Idaho Bureau of Laboratories (IBL) provides laboratory services that support DHW programs, the local public health districts, other state agencies, and Idaho residents.

IBL is certified by the Centers for Medicare and Medicaid Services as a high complexity clinical laboratory and by the Environmental Protection Agency as the principal state laboratory for drinking water analysis. It is the state's only public health laboratory.

IBL provides many critical testing services that aren't available anywhere else in Idaho. For example, in SFY 2024, IBL received 382 animal specimens for rabies testing after a human or animal exposure. Of these 382 samples, 25 tested positive. Rabies infection causes a debilitating infection of the brain that without prompt treatment is nearly 100% fatal. Prompt, accurate testing results allowed 25 people in Idaho who were exposed to a rabid animal to receive life saving treatment. It also provided relief to 357 Idaho families who thought they might have been exposed to rabies. Those exposed to rabies are quickly and appropriately treated and those not exposed avoid a series of post exposure shots that cost nearly $1,000. In 2024, IBL's rabies testing helped direct 25 people into life-saving care and saved nearly $35,700 in potential post exposure treatment costs.

IBL services are organized into four program areas:

- Testing
- Inspection
- Training
- Outreach

## Testing programs

IBL provides both clinical and environmental testing services. Clinical specimens are tested in support of outbreak investigations to identify emerging or re-emerging diseases and to rule out or confirm biological or chemical threat agents.

IBL operates the state tuberculosis laboratory, serves as a World Health Organization and Centers for Disease Control and Prevention global influenza surveillance laboratory, and partners with county mosquito abatement districts to identify and mitigate West Nile Virus.

IBL also has the state's only infectious disease genomics laboratory, where scientists perform bacterial and viral whole genome sequencing to link cases, identify the source of outbreaks, and monitor for new variants in the state.

Environmental samples are tested to make sure Idahoans have safe drinking water and unpolluted air, rivers, lakes, streams, and lands. In State Fiscal Year 2024, IBL completed its 14th year of collaboration with the Idaho Departments of Water Resources, Environmental Quality, and Agriculture in support of the Statewide Groundwater and Aquifer Recharge programs. One of the successes of this collaboration has been the experience gained by IBL seasonal technicians who conduct field tests and collect water throughout Idaho. Many of those technicians have transitioned into successful careers with the experience gained from their summer work.

## Inspection programs

IBL provides inspection services to ensure that Idaho laboratories, air quality monitoring stations, and X-ray service providers are adhering to state and federal regulations. In collaboration with the Department of Environmental Quality, IBL inspects and certifies all Idaho laboratories providing drinking water testing. IBL also has an inspector for statewide air quality monitoring stations to help make sure the state is meeting all air quality attainment standards. IBL registers all Idaho clinical laboratories, and in collaboration with the Centers for Medicare and Medicaid Services, enforces state and federal laboratory quality standards to ensure patient safety. In 2024, there were more than 2,000 active clinical laboratories in the registry.

IBL also houses the Idaho Radiation Control Program, which licenses and inspects all X-ray producing devices in the state to make sure they are operating normally, and that facility staff are

trained in radiation safety protocols. In 2024, there were more than 1,500 Idaho clinical, academic, and industrial settings with active X-ray device licenses.

### Training programs

Promoting laboratory safety is a key function of the state laboratory. IBL provides training opportunities for clinical laboratories to ensure they can effectively recognize, rule out, and refer biological or chemical threat agents, as well as appropriately package and ship those diagnostic specimens that may contain biological or chemical threat agents to the state lab.

IBL also participates in training exercises with the Idaho Military Division's 101st Weapons of Mass Destruction Civil Support Team and other local and federal first responders to be prepared to respond to a biological or chemical terrorism event. As the state's only Laboratory Response Network reference laboratory, IBL assists first responders with the detection and confirmation of these high-consequence agents.

### Outreach programs

Idaho has a relatively small but collaborative science community. IBL seeks to provide awareness of public health laboratory career opportunities by presenting at local, state, and regional conferences and by providing academic internships. IBL also works with clinical laboratories and health professionals to promote antibiotic stewardship best practices and increase awareness about the growing threat of antibiotic resistance. IBL collaborates with colleagues in the Bureau of Environmental Health and Communicable Disease's Healthcare Associated Infections Program to identify antibiotic resistance trends, test for emerging resistant bacteria, and promote infection prevention practices in clinical settings.

Outside of academic and clinical settings, IBL works to educate Idaho's many private well owners about how to properly maintain their systems and test their well water. IBL collaborates with fellow state agencies and many citizen scientists to publish an interactive map of ground water quality conditions for Idaho's private well owners. More information about this well water outreach is available at https://storymaps.arcgis.com/stories/063ac6bf42644b2394306fdd11196471

Additional information about the Idaho Bureau of Laboratories is available at https://statelab.idaho.gov.

## BUREAU OF RURAL HEALTH AND PRIMARY CARE

The Bureau of Rural Health and Primary Care administers programs to improve access to healthcare in rural and underserved areas. To accomplish this, the bureau oversees medical education loan repayment programs; offers education, resources, and technical assistance to support quality and performance improvement for Idaho's 27 critical access hospitals, 51 rural health clinics, and 16 free medical clinics; and provides scholarships for training and peer-to-peer learning. The bureau consists of the following program areas:

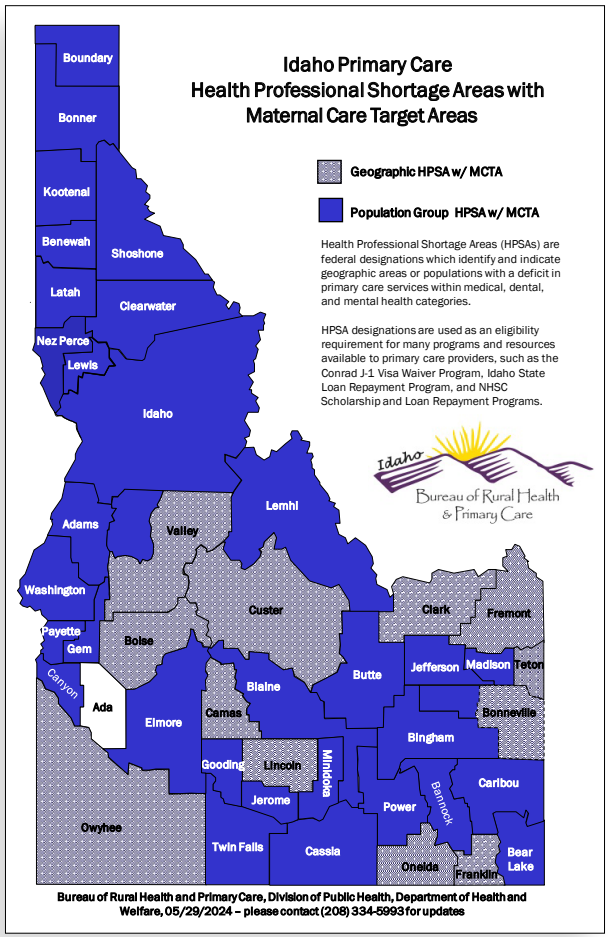
- Health Professional Shortage Area Designations
- Rural Physician Incentive Program
- Rural Healthcare Access Program
- State Loan Repayment Program
- Conrad J-1 Visa Waiver and National Interest Waiver Program
- Office of Healthcare Policy Initiatives
- Rural Nursing Loan Repayment Program

For more information on the bureau or any of the above programs, please visit https://ruralhealth.dhw.idaho.gov.

## Health Professional Shortage Area Designations

A shortage designation identifies an area, population, or facility experiencing a shortage of healthcare services. The bureau collects data and manages Health Professional Shortage Area (HPSA) designations for the state. Idaho is ranked 45th in the nation for an inadequate number of primary care providers per 100,000 residents.

In 2024, 98.7% of Idaho was designated as a Primary Care HPSA; 100% of the state was designated as a Mental Health HPSA; 95.7% of the state was designated a Dental Health HPSA; and 98% of Idaho was designated as a Maternity Care Health Professional Target Area (MCTA). HPSA designations are commonly used as a qualifier for state and federal resources such as clinician loan repayment opportunities.




## IDAHO GEOGRAPHIC AREAS WITH HEALTH PROFESSIONAL SHORTAGE AREA DESIGNATION

| | CY 2020 | CY2021 | CY2022 | CY2023 |
|---|---|---|---|---|
| **Primary Care** | 95.4% | 98.2% | 98.7% | 98.2% |
| **Dental Health** | 94% | 95.7% | 95.7% | 95% |
| **Mental Health** | 100% | 100% | 100% | 100% |
| **Maternal Care** | * | * | 98% | 98% |

**not measured*

## Rural Physician Incentive Program

The Rural Physician Incentive Program (RPIP) is a medical education loan repayment program for qualifying physicians serving in a Health Professional Shortage Area. This program is funded by state general funds and fees assessed to medical students participating in state-supported programs at the University of Washington and University of Utah. Physicians may receive up to $100,000 over four years ($25,000 per year) for loan repayment. In SFY 2024, 16 new physicians were awarded. In total, 51 physicians have received loan repayment. Approximately 80% of providers who participate in RPIP stay in Idaho. Of those, 92% continue to work in a Health Professional Shortage Area.

## Rural Healthcare Access Program

The Rural Healthcare Access Program (RHCAP) provides up to $35,000 per year to organizations in Health Professional Shortage Areas and Medically Underserved Areas in Idaho to improve access to primary medical and dental healthcare. Funded activities improve access to healthcare through community development, telehealth, and other relevant assistance categories such as recruitment and retention.

In SFY 2024, RHCAP issued five grants to Idaho organizations totaling $160,500. Projects were funded in Benewah, Bingham, Custer, and Bannock counties. Projects included medical education loan repayment for physician assistants and a nurse practitioner, support for a free medical clinic operation, expanded access to pediatric care, health literacy education for the Hispanic community, and access to free patient transportation.

### RURAL HEALTHCARE ACCESS PROGRAM GRANTS

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Grant Requests** | $422,608 | $172,500 | $365,470 | $568,057 |
| **Amount Awarded** | $188,000 | $164,424 | $161,800 | $160,500 |
| **Applicants** | 13 | 6 | 11 | 18 |
| **Awarded** | 8 | 6 | 5 | 5 |

## State Loan Repayment Program

The State Loan Repayment Program began in September 2014 and is the first multi-discipline, state-based loan repayment program for clinicians in Idaho. This program is funded with federal funds and participating sites must implement a sliding-fee scale for low-income and uninsured patients. Loan repayment awards can be up to $25,000 per year, depending on the eligible debt of the clinician. The service obligation must be a minimum of two-years. In SFY 2024, seven advanced practice providers, two physicians, a pharmacist, three psychologists, and a certified nurse anesthetist continued completing their service obligations.

## Conrad J-1 Visa and National Interest Waivers

The Conrad J-1 Visa Waiver Program allows medically underserved communities to recruit and hire a foreign-trained primary care physician or psychiatrist as an option of last resort. The National Interest Waiver program provides a mechanism for Idaho communities to apply for placement of a foreign physician after demonstrating inability to recruit an American physician. This waiver allows the foreign physician to stay in the United States in exchange for a commitment to practice medicine to an underserved population for three to five years. The bureau reviews and recommends Conrad J-1 Visa Waivers and National Interest Waivers for final federal approval. Fourteen active providers with J-1 waivers are completing their three-year service obligation and Idaho has a total of 30 waivers available per federal fiscal year. Idaho received one National Interest Waiver during SFY 2024.

## Office of Healthcare Policy Initiatives

The Office of Healthcare Policy Initiatives (OHPI) supports Idaho's transition to value-based healthcare (VBC). This is a delivery model that focuses on rewarding healthcare providers and systems for delivering high-quality, patient-centered care. VBC promotes preventive care, personalized treatment plans, and efficient use of resources, which can reduce hospital readmissions, minimize medical errors, and lower healthcare costs.

Additionally, OHPI is responsible for the operation, maintenance, and customer support of the Idaho Healthcare Directive Registry (IHDR). This is a secure, web-based platform that allows users to safely store, create, and share their healthcare advance directives and Physician Orders for Scope of Treatment (POST) forms. These documents ensure that an individual's preferences for end-of-life care are honored, helping to prevent unnecessary suffering and strain while also minimizing healthcare costs for their family.

Since transitioning from the Secretary of State to the Department of Health and Welfare in October 2020, IHDR has seen a substantial increase in usage. Through successful outreach events and promotion, the registry now securely holds more than 80,000 advance care planning documents, reflecting a 46% increase since its launch. The IHDR resource site can be found at the Department's Advance Care Planning website.

## IDAHO HEALTHCARE DIRECTIVE REGISTRY

| | SFY 2021 | SFY 2022 | SFY 2023 | SFY 2024 |
|---|---|---|---|---|
| **Advance Care Planning Documents** | 42,206 | 64,357 | 71,882 | 80,395 |
| **Hospitals & Clinics with Registry Access** | N/A | 203 | 291 | 426 |

### Rural Nursing Loan Repayment Program

The Rural Nursing Loan Repayment Program (RNLRP) is a nursing education loan repayment program for qualifying registered nurses and licensed practical nurses. This program exists to help address the nursing shortage in Idaho. Eligible nurses may receive up to $25,000 over three years ($5,000 for the first year and $10,000 for the final two years) for nursing education loan repayment. Per statute up to 50 nurses are eligible to receive awards each year. In SFY 2024, the first year of the program, 146 nurses were interested in RNLRP, 79 submitted applications, and 50 nurses were awarded.

# BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

The Bureau of Vital Records and Health Statistics serves Idaho residents by registering, documenting, correcting, and amending records of vital events, which include births, deaths, marriages, divorces, stillbirths, miscarriages, and abortions. The bureau also issues certified copies of vital records to those who are legally entitled to receive them.

Additionally, the bureau provides public health data and analysis of health trends that can be used to develop and shape future health interventions and programs.

The Bureau of Vital Records and Health Statistics is participating in data modernization efforts by

- Implementing Fast Health Care Interoperability Resources (FHIR), which will modernize how the bureau exchanges data with federal partners. Thanks to the team of DHW information technology staff and bureau staff, Idaho is the first state to implement FHIR messaging system to transmit mortality data to the National Center for Health Statistics.
- Replacing its 15-year-old Electronic Death Registration system with a modern replacement that was built in-house called EDRS 2. This version includes security enhancements, expanded certificate ordering options, fully automated supplemental coroner reporting, and digital document creation.

Bureau programs include:

- Vital Records Services
- Vital Records Management
- Health Statistics

## Vital Records Services

The Vital Records Services Program responds to customer requests for certified copies of vital records (such as birth and death certificates), and makes corrections and amendments to vital records.

The Customer Service Team in this program receives customer orders, makes sure the customer is legally entitled to the record, and mails out certified copies of the records.

Most changes made to vital records after they have been filed are processed by the Legal Amendments Team. Changes can include corrections, court-ordered name changes, amendments, paternity actions, adoptions, and surrogacies. The team also processes delayed registration of vital events and certificates of birth for children whose births were not attended by a medical professional.

The Legal Amendments Team also manages the three registries that are maintained in Vital Records Services:

Voluntary Adoption Registry, which matches parents and adopted children who would like to connect with each other

Putative Father Registry, which helps fathers of children born out of wedlock establish paternity rights

Abandoned Child Registry, which facilitates claims of parental rights by parents of children who have been abandoned by the other parent

## Vital Records Management

The Vital Records Management Program develops, maintains, and supports a range of systems that are used by Idaho entities that register vital events in Idaho.

The Electronic Birth Certificate system allows birthing facilities throughout Idaho to submit birth certificates directly to the bureau and allows birth parents to request a Social Security Number for the newborn without having to visit a local social security office.

The Electronic Death Registration System allows mortuary services and medical providers to submit death certificates directly to the bureau. Part of the electronic registration process is to notify the Social Security Administration that a death has occurred, reducing errors in social security benefit payments that must be recovered from the estate.

Continuous quality improvements are being made to the vital records database management system, which is used to provide direct customer service and certified copies of vital events to customers. The registration team reviews and directly enters information from paper-based vital events records to make sure they meet legal and quality standards. Field operations personnel provide training and technical assistance to registration partners, including birthing facilities, mortuaries, medical professionals, and elected county coroners and county clerks.

### BIRTHS, DEATHS, MARRIAGES, AND DIVORCES REGISTERED BY YEAR

| CY | Births | Deaths | Marriages | Divorces |
|---|---|---|---|---|
| **2023** | 22,411 | 16,449 | 13,670 | 6,558 |
| **2022** | 22,380 | 17,115 | 14,304 | 6,419 |
| **2021** | 22,427 | 18,334 | 14,030 | 6,411 |
| **2020** | 21,540 | 16,397 | 13,274 | 6,217 |

## Health Statistics

The Health Statistics Program collects, analyzes, and publishes public health data. Data sources include vital records; the Idaho Violent Death Reporting System, which collects data on violent deaths; and the State Unintentional Drug Overdose Reporting System, which reports on drug overdose data.

The program publishes health data dashboards on birth data, population data, and violent death data. These dashboards are available at www.gethealthy.dhw.idaho.gov under the Population Health Data menu.

Statistical reports and publications can be found at https://healthandwelfare.idaho.gov/about-dhw/reports-and-statistics by scrolling to Vital Records and Health Statistics. Additional information about obtaining an Idaho certificate is available at vitalrecords.dhw.idaho.gov.

# DIVISION OF SELF-RELIANCE

**JOHN BERNASCONI, ADMINISTRATOR**

**208-332-7258**

The Division of Self-Reliance promotes stable, healthy families by helping Idahoans meet their basic needs and gain financial and health stability.

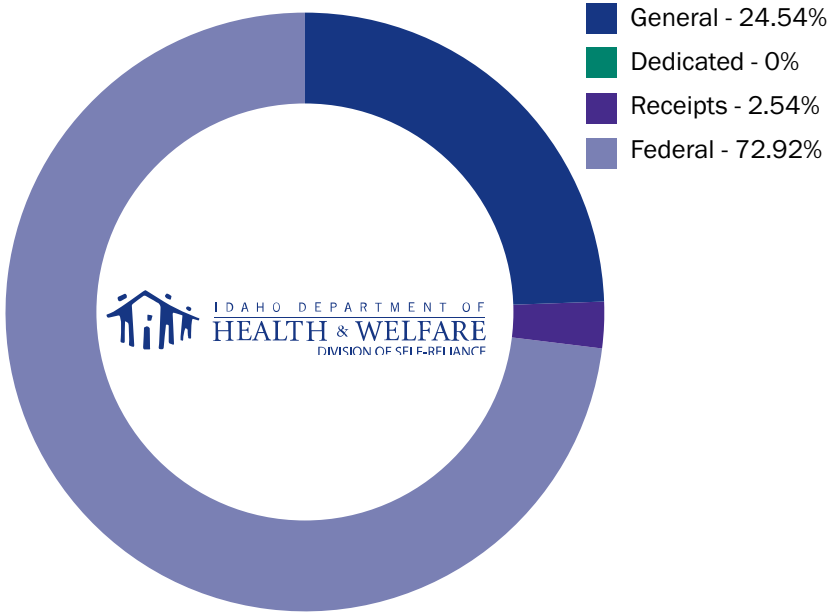
Programs administered by the division include:

- Child Support Services
- Supplemental Nutrition Assistance Program (SNAP)
- Idaho Child Care Program (ICCP)
- Cash Assistance
  - Temporary Assistance for Families in Idaho (TAFI)
  - Aid to the Aged, Blind, and Disabled Cash (AABD)
- Employment and Training Program
- Medicaid programs
  - Medicaid eligibility
  - Aid to the Aged, Blind, and Disabled (AABD-Medicaid)
- Community Action programs
  - The Emergency Food Assistance Program (TEFAP)
  - Low-Income Home Energy Assistance Program (LIHEAP)
  - Weatherization Assistance Program (WAP)

These Self-Reliance programs provide critical support options for low-income families and individuals while encouraging participants to improve their financial situations and become more self-reliant.

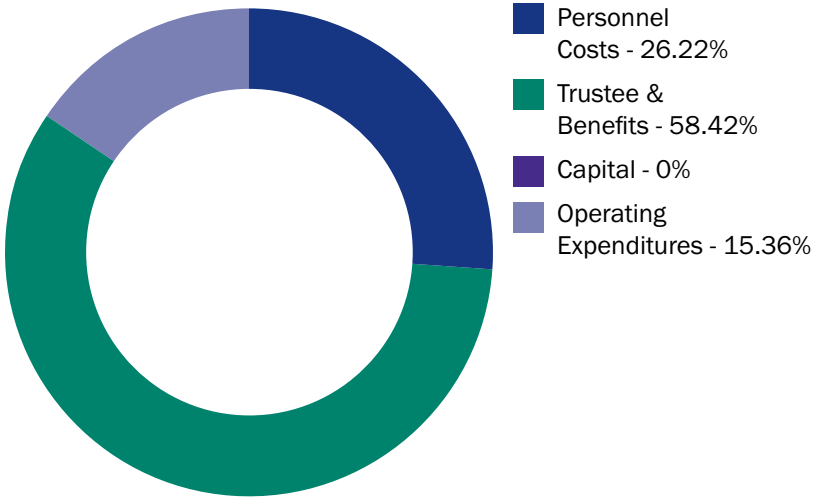
Self-Reliance focuses on helping Idaho families live better through nutrition education, work and training programs, access to quality child care and early learning programs, and healthcare coverage programs. The division also administers additional programs through contracts with local partner organizations that provide food and assistance for home energy costs and home weatherization.

## SFY 2025 FUNDING SOURCES

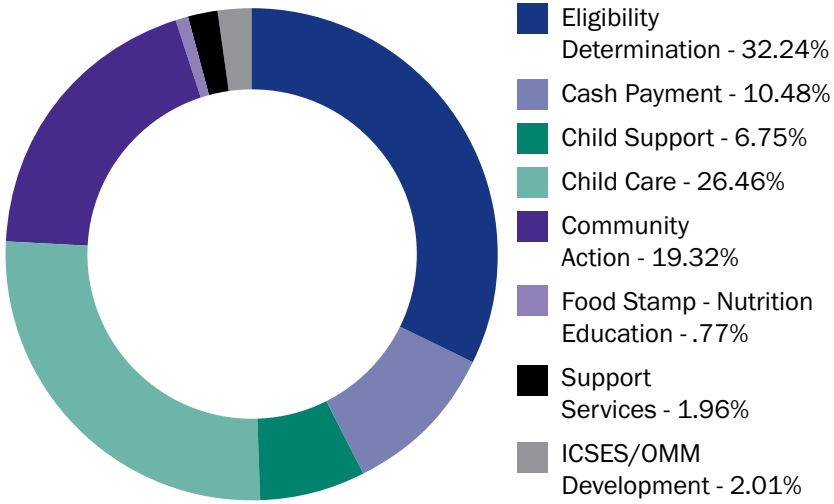



*Authorized FTP: 613.5; Original appropriation for SFY 2024: general funds $46,920,100, total funds $191,206,500; 3.50% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES




## SFY 2025 APPROPRIATION BY PROGRAM


Eligibility Determination - 32.24%
Cash Payment - 10.48%
Child Support - 6.75%
Child Care - 26.46%
Community Action - 19.32%
Food Stamp - Nutrition Education - .77%
Support Services - 1.96%
ICSES/OMM Development - 2.01%

# SFY 2024: DIVISION HIGHLIGHTS

The Self-Reliance programs help low-income families in Idaho gain stability and financial independence by providing eligibility determination for critical support services. The combination of key supports, such as Medicaid, food and nutrition assistance, child care, child support, and job search assistance, helps families obtain employment or remain in the workforce as they balance their ability to pay bills, buy groceries, and provide for their children.

The division currently serves about 199,800 families who receive services from benefit programs in the following groups:

| Families with Children | Disabled adults | Seniors over 65 | Non-disabled adults over 65 |
|---|---|---|---|
| 41% | 19% | 14% | 26% |

About one in three participant families have at least one elderly or disabled member living in the household. About 354.510 individuals receive services through a benefit program in Idaho sometime throughout the year, with 62% participating in one program and 38% participating in two or more programs.

For more than 10 years, Idaho has led the nation in Supplemental Nutrition Assistance Program (SNAP) application timeliness. Last year, the state processed more than 98% of applications within 30 days. Idaho continued its success by processing applications in less than five days on average and ranking among the top three states for benefits accuracy.

The division has worked on two long-term projects to save time for both customers and staff. One project made the idalink customer portal mobile-friendly, so people can easily manage their benefits on the go. The other project improved electronic communication by letting customers receive and view notices online. Together, these updates help ensure Idahoans get timely and accurate information.

The Division of Self-Reliance also administers the Idaho's Child Support Program. The primary focus is to ensure that children have support they need from both their parents. About 58% of families with a current child support case also participate in a benefit program. In March, the division updated how license suspension cases are handled by automating parts of the process. This helps staff work faster, support more families, and improve services for children. Partner agencies that help with suspending and releasing licenses are also working more efficiently thanks to these changes.

The Division of Self-Reliance is committed to improving services for Idaho families. By making it easier for people to manage their benefits online and speeding up key processes, the division helps ensure families get the support they need. With continued focus on efficiency and accuracy, these updates are making a positive impact on both customers and staff.

# SELF-RELIANCE SERVICES

The Division of Self-Reliance provides services in three categories.

**1. Benefit Program services:**

- Food assistance (Supplemental Nutrition Assistance Program (SNAP), or Food Stamps)
- Child care assistance (Idaho Child Care Program)
- Eligibility determination for Medicaid
- Cash assistance in the form of Temporary Assistance for Families in Idaho (TAFI) and Aid to the Aged, Blind, and Disabled (AABD) programs

Applications are available in offices around the state, as well as online, by phone, and through the mail. These services have strict eligibility requirements as identified in state and federal rules. Benefit program services are delivered to those receiving food stamps and cash benefits through the Electronic Benefit Transfer (EBT) system.

### 2. Child Support services:

- Locating an absent parent, conducting paternity testing, and creating a new and/or enforcing an existing child support order, or modifying a support order
- Providing medical support enforcement to ensure children are covered by health insurance
- Helping other states enforce orders and collect child support for parents living in Idaho, which accounts for about one-fifth of Idaho's child support cases

The Child Support Program uses secure electronic transfer of collected funds to distribute child support funds to families.

### 3. Partnership Program services:

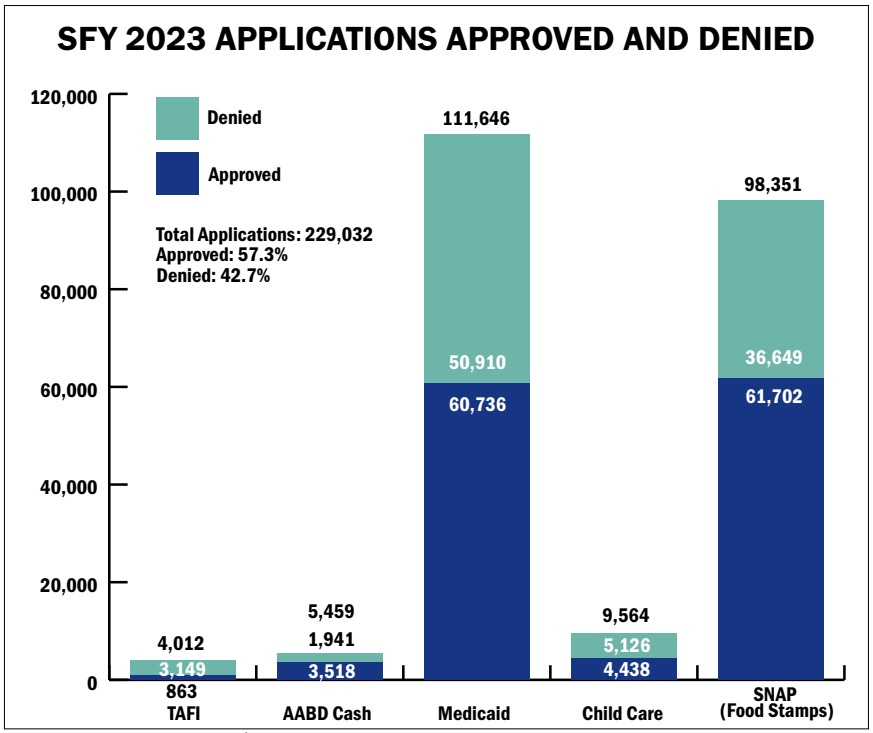
- Community Service Block Grants (CSBG), which help eliminate the causes of poverty and enable families and individuals to become self-reliant
- Nutrition-related services and food commodities through The Emergency Food Assistance Program (TEFAP)
- Home energy assistance through the Low-Income Home Energy Assistance Program (LIHEAP)
- Weatherization Assistance Program (WAP) to help low-income households conserve energy and save money

Partnership programs are supported by state and federal funds the division directs to local non-profit and community-based service providers. Local needs are often best met by local organizations. That is why the division subgrants with a multitude of organizations committed to meeting the needs of Idahoans throughout the state.

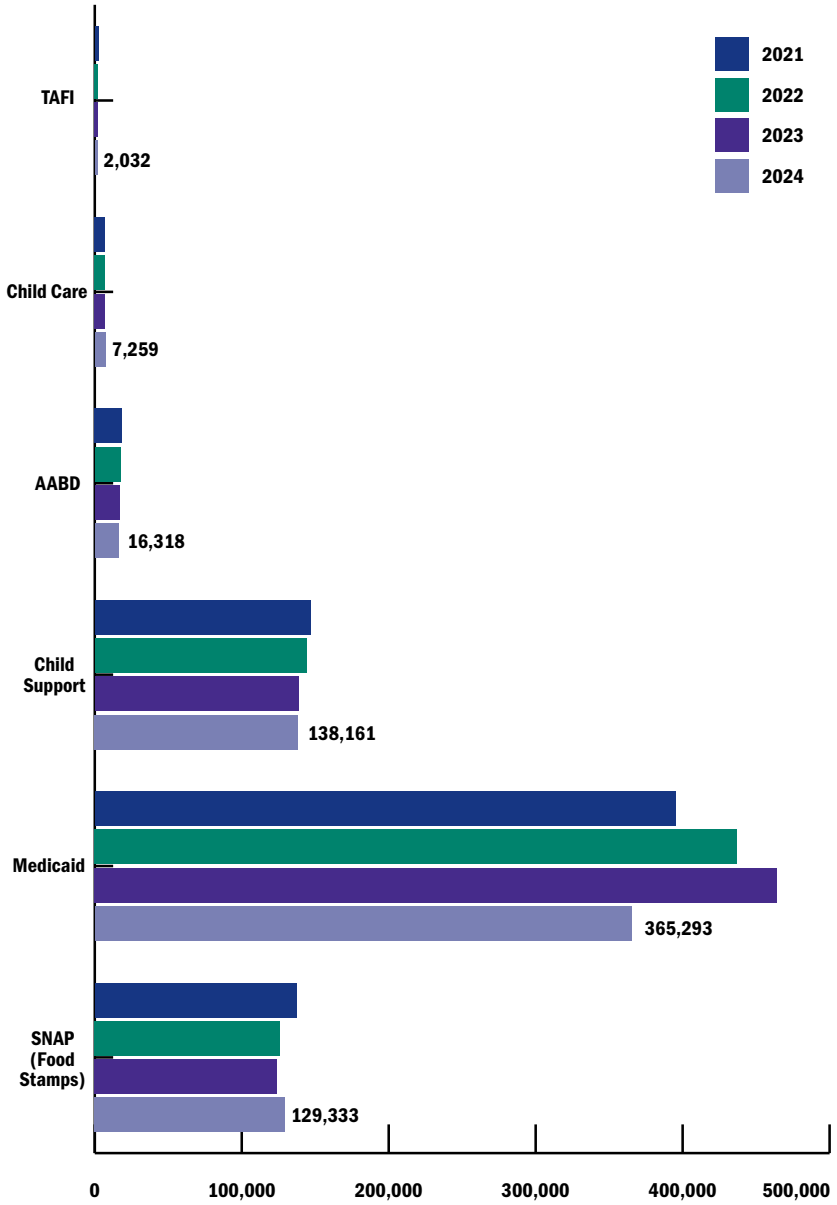
# PROGRAM PARTICIPATION

Participation in benefit programs, the Child Support Program, and partnership programs is measured by the average monthly caseload or individuals served each month, but these numbers do not give a complete picture of the number of people served during the year. The numbers also do not give an accurate picture of the workload for the Self-Reliance staff.

Benefit programs are intended to help low-income families in Idaho by providing critical support services. Each program has their own income, resource limits, residency, and citizenship requirements used as part of the eligibility determination process. The SNAP (Food Stamps) and TAFI programs have work participation requirements to help individuals find and keep employment and move on to higher wages and self-sufficiency. The Idaho Child Care Program requires eligible families to have a qualifying activity, such as working, attending school, or participating in training. As low-income families find success in the workplace, long-term outcomes for families and children improve.



## AVERAGE MONTHLY INDIVIDUALS SERVED




*Note: Many participants receive services from more than one program, so adding columns together will not produce the number of individuals receiving services; it includes duplicates. Child support data is a case count and does not reflect the number of individuals served.*

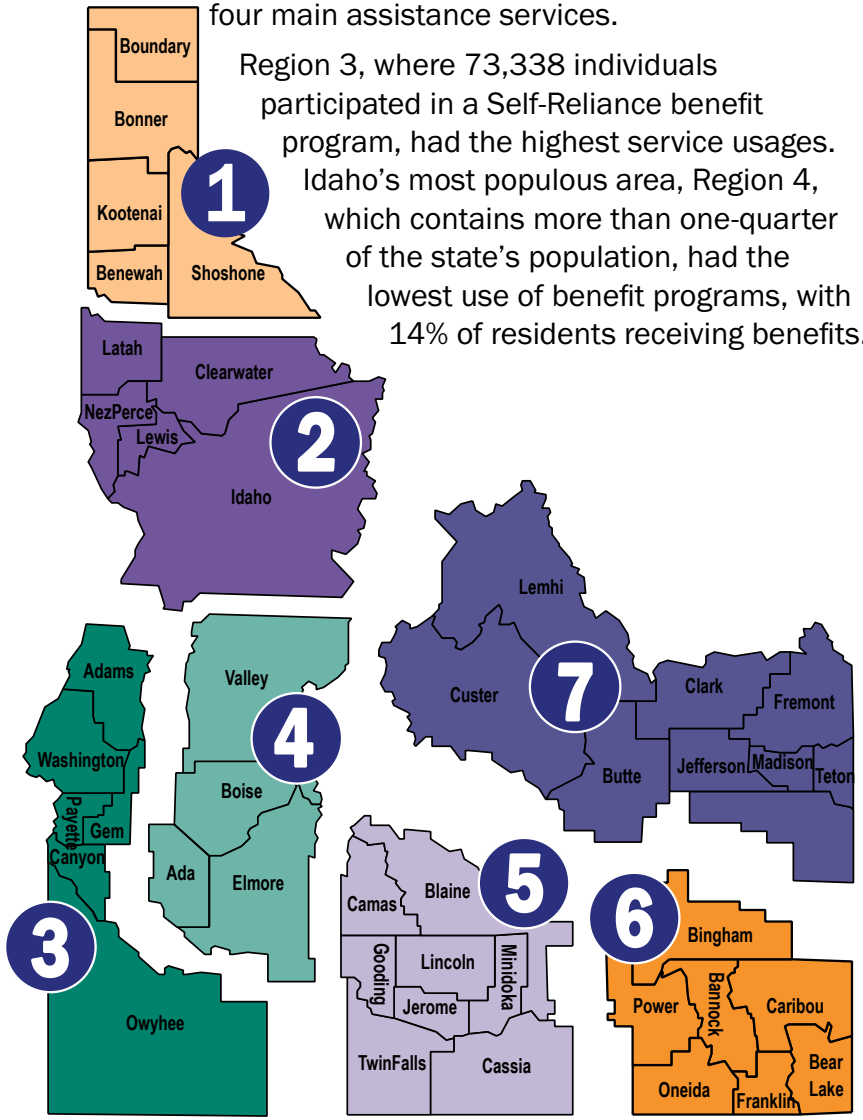
*In 2024, 219,364 individuals individuals were served in the Child Support Program. All programs are reported by state fiscal year except the Child Support Program, which reports by federal fiscal year.*

## Numbers served by region

In June 2024, a total of 354,510 people received assistance in Medicaid, food stamps, child care, and cash assistance. This is about 18% of the state's total population. More than 411,000 Idahoans were served in 2023.

Region 3, which includes Canyon County, has the greatest percentage of population receiving assistance services, while Region 4 has the lowest. Three of the seven regions have more than 20% of their populations receiving one of the four main assistance services.

Region 3, where 73,338 individuals participated in a Self-Reliance benefit program, had the highest service usages. Idaho's most populous area, Region 4, which contains more than one-quarter of the state's population, had the lowest use of benefit programs, with 14% of residents receiving benefits.



| Region | Estimated Population | Medicaid | Receiving Cash Payments | Food Stamps | Child Care Assistance | Totals |
|---|---|---|---|---|---|---|
| **1** | 275,509 | 44,913 | 2,454 | 16,428 | 820 | 45,482 |
| | 14.0% | 16.3% | 0.9% | 6.0% | 0.3% | 16.5% |
| **2** | 115,131 | 18,130 | 1,401 | 6,816 | 226 | 18,381 |
| | 5.9% | 15.7% | 1.2% | 5.9% | 0.2% | 16.0% |
| **3** | 335,074 | 72,302 | 3,729 | 29,082 | 1,628 | 73,338 |
| | 17.1% | 21.6% | 1.1% | 8.7% | 0.5% | 21.9% |
| **4** | 575,558 | 79,449 | 4,358 | 30,406 | 2,296 | 80,515 |
| | 29.3% | 13.8% | 0.8% | 5.3% | 0.4% | 14.0% |
| **5** | 216,595 | 44,733 | 2,078 | 17,023 | 1,058 | 45,212 |
| | 11.0% | 20.7% | 1.0% | 7.9% | 0.5% | 20.9% |
| **6** | 183,480 | 39,453 | 2,137 | 15,482 | 826 | 39,977 |
| | 9.3% | 21.5% | 1.2% | 8.4% | 0.5% | 21.8% |
| **7** | 263,379 | 51,074 | 1,905 | 17,583 | 1,298 | 51,605 |
| | 13.4% | 19.4% | 0.7% | 6.7% | 0.5% | 19.6% |
| **Totals** | 1,964,726 | 350,054 | 18,062 | 132,820 | 8,152 | 354,510 |
| | 100.0% | 17.8% | 0.9% | 6.8% | 0.4% | 18.0% |

*Note: Estimated population percentage (in column 2) represents regional share of the state's total population. Percentages under each program are the percentage of each region's population participating in that program. Many participants receive services through more than one program. The total (in the last column) is an unduplicated count of these four Self-Reliance programs.*

# BENEFIT PROGRAM SERVICES

The Division of Self-Reliance manages assistance and support services in four major programs:

1. Supplemental Nutrition Assistance Program (SNAP)
2. Idaho Child Care Program (ICCP)
3. Medicaid eligibility determination, including Aid to the Aged, Blind, and Disabled (AABD)
4. Cash assistance (through Temporary Assistance for Families in Idaho (TAFI), and Aid to the Aged, Blind, and Disabled (AABD)

## Supplemental Nutrition Assistance Program (Food Stamps)

The Supplemental Nutrition Assistance Program (SNAP) helps low-income families maintain good health and nutrition. SNAP benefits are federally funded, but the state shares the cost of administering the program with the federal government. Benefits are provided monthly on an EBT card.

Families must live in Idaho, be U.S. citizens or meet specific criteria for lawful residency, have income at or below 130% of the Federal Poverty Limit for family size, and meet resource limits. Adult participants must participate in a work program, unless they are exempt.

All eligibility requirements are verified through electronic interfaces or documentation provided by the family. Approved families must participate in a six-month or 12-month recertification.

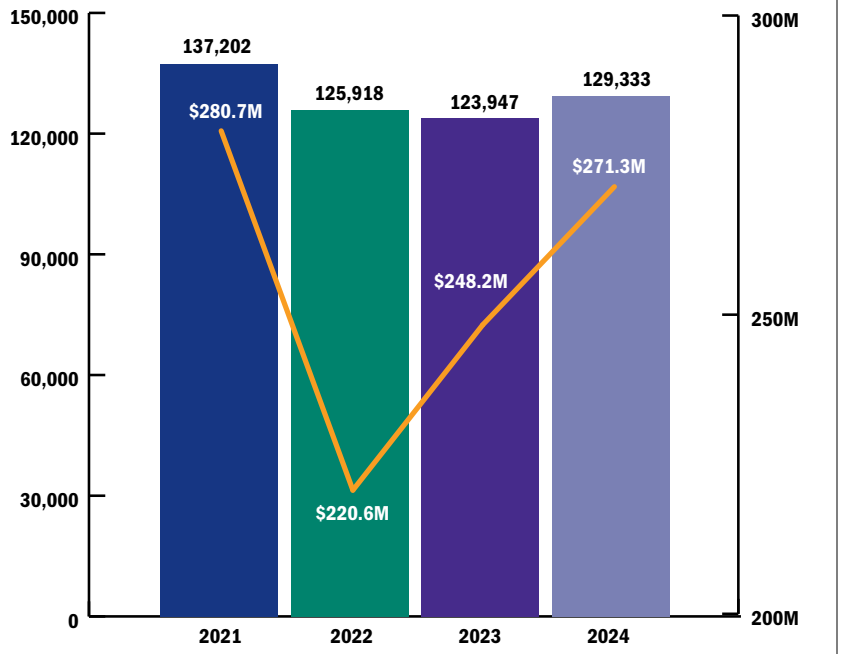
SNAP benefit amounts are determined based on family size, income and expenses. In June 2024, the average SNAP allotment per person in Idaho was $175, or about $1.94 per meal.

Households may use SNAP benefits to purchase foods such as breads, cereals, fruits, vegetables, meats, and dairy products.

SNAP enrollment is responsive to economic conditions, expanding during recessions and contracting during improved economic times. During SFY 2024, the number of individuals receiving SNAP benefits increased from 125,600 in June 2023 to 132,820 in June 2024.

Idaho's SNAP program continues to be one of the top programs in the country for issuing benefits accurately and timely, without increasing staffing or administrative overhead costs. In 2024, most eligible Idaho families received benefits within three days of applying, with 75% of families receiving benefits the same day they applied.

## SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP): AVERAGE INDIVIDUALS SERVED PER MONTH AND TOTAL BENEFITS PROVIDED




## Idaho Child Care Program

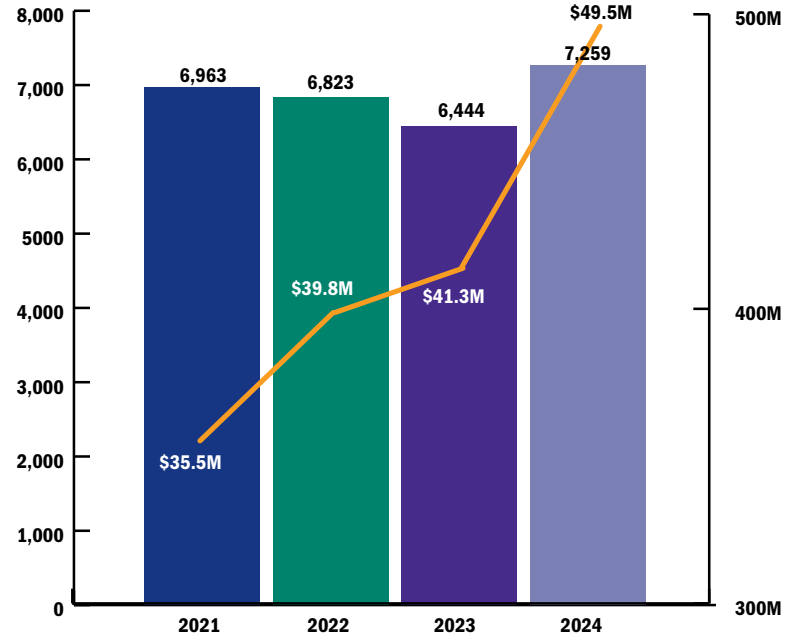
The Idaho Child Care Program (ICCP) provides critical work supports in the form of child care subsidies to families that are working or completing their education. Child care assistance also plays a critical role in the development of the child by focusing on ensuring children have access to high quality child care.

Because of the high costs of child care, many low income families could not afford to work and pay for child care without ICCP assistance. On average, ICCP provided services for about 7,259 children per month during SFY 2024, with total annual provider payments of $49.6 million.

To qualify for child care assistance, a family must meet the following requirements:

- Children must be under the age of 13
- Parents must be working or attending school or training
- Children must be U.S. citizens or meet specific criteria for lawful residence

## ICCP: AVERAGE MONTHLY CHILDREN SERVED AND TOTAL ANNUAL BENEFITS PROVIDED

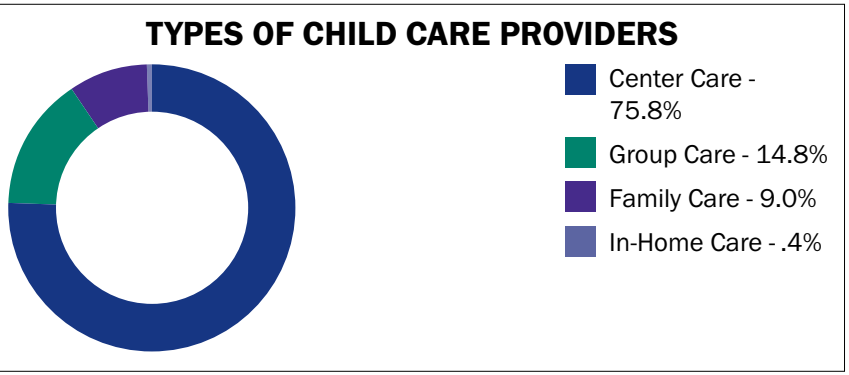


The Idaho Child Care Program also helps families find child care providers in their area through the department's referral system. Last year, 360 child care referrals were provided for Idaho families. The Idaho Child Care Program also invests in the quality of care to support children's healthy development and learning by supporting child care licensing, quality improvement systems to help programs meet higher standards, and support for child care workers to receive more training and education.

**QUALIFIED ACTIVITY TYPES**

The next chart is a breakdown of the type of child care parents receiving ICCP chose for their children in SFY 2024.

**TYPES OF CHILD CARE PROVIDERS**




In SFY 2024, the ICCP program provided resources, training, education, scholarships, and incentives to child care providers who sought to improve the quality of their child care programs. IdahoSTARS conducted 48,611 training sessions and provided 578 training scholarships and 58 academic scholarships statewide, at an annual cost of $270,250 in SFY 2024. IdahoSTARS also supported providers with $77,812 in program improvement grants and incentives.

## Medicaid Eligibility

The Division of Self-Reliance determines eligibility for Medicaid programs. All Medicaid recipients must be a resident of Idaho and either a U.S. citizen or a qualified legal non-citizen.

Idaho Medicaid includes two basic eligibility types: income-based eligibility and aged/disabled coverage.

For income-based eligibility, adults must have income below 138% and children below 190% of the Federal Poverty Limit, including a 5% disregard. There is no resource limit for income-based Medicaid coverage.

Medicaid is also available to individuals who are age 65 or older, or are blind or disabled. These individuals must meet income and resource limits based on disability and other factors to receive Medicaid.

Eligibility requirements must be verified with documentation from the family or through electronic interfaces.

The average monthly Medicaid enrollment decreased by 21% during SFY 2024. As of June 2024, about 350,000 people were receiving Medicaid. The state receives about 9,300 Medicaid applications each month. Medicaid eligibility is re-evaluated every 12 months.

In SFY 2024, the department processed about 111,500 applications for Medicaid.

## Cash Assistance

### 1. Temporary Assistance for Families in Idaho (TAFI)

The TAFI Program provides temporary cash assistance and work preparation services for families with children under the age of 18. The program serves an average of 1,500 households and about 2,100 individuals.

Approximately 98% of households in the program are child-only cases. The remaining 2% are single or two-parent households. Child-only cases are usually relatives caring for a child whose parents cannot care for them.

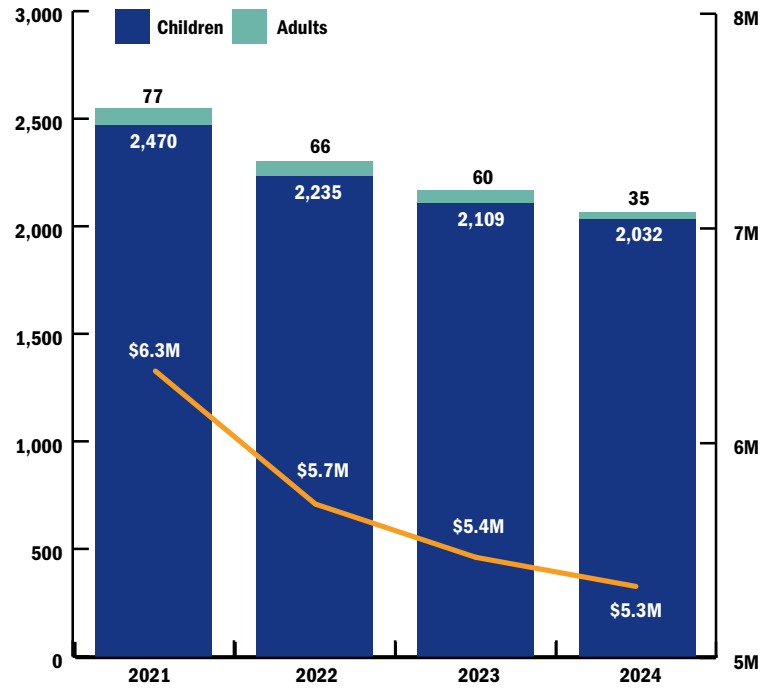
Idaho TAFI beneficiaries receive a maximum of $309 per month, regardless of family size. These funds help pay for food, shelter, clothing, and other essentials. Idaho has a lifetime limit of 24 months of TAFI cash assistance for adults; however, this time limit does not apply to child-only cases. To qualify for TAFI cash assistance, a family must meet the following eligibility requirements:

- Be an Idaho resident who is either a U.S. citizen or meets criteria for lawful residency
- Meet income eligibility limits for family size
- Meet personal asset limits
- Cooperate with Child Support enforcement
- Participate in drug and alcohol screening, and comply with a treatment plan if determined to need treatment
- Participate in the Enhanced Work Services Program and meet strict participation requirements

Idaho's TAFI cash assistance program requires participation in work and education preparation activities that build or enhance the skills needed to increase participants' income, so they become self-sufficient. They are required to participate 20-40 hours per week (depending on family composition) in approved activities, including searching for a job, education directly related to employment, work experience opportunities, and treatment for substance use disorders.

Failure to meet these required activities results in closure of the TAFI assistance and an additional penalty period during which the family is not eligible to receive TAFI cash. Child-only cases are not subject to work participation requirements.

**TAFI: AVERAGE INDIVIDUALS SERVED PER MONTH AND TOTAL ANNUAL BENEFITS PROVIDED**




### 2. Aid to the Aged, Blind, and Disabled (AABD)

AABD provides cash assistance to certain low-income people who also receive Social Supplemental Income (SSI) because they are blind, disabled, or age 65 or older. AABD cash assistance is intended to supplement the person's income to help them meet the needs of everyday living.

Idaho currently meets the Maintenance of Effort (MOE) requirements established by the Social Security Administration to administer a State Supplemental Cash Program. The current MOE provides a monthly average cash benefit amount of $53

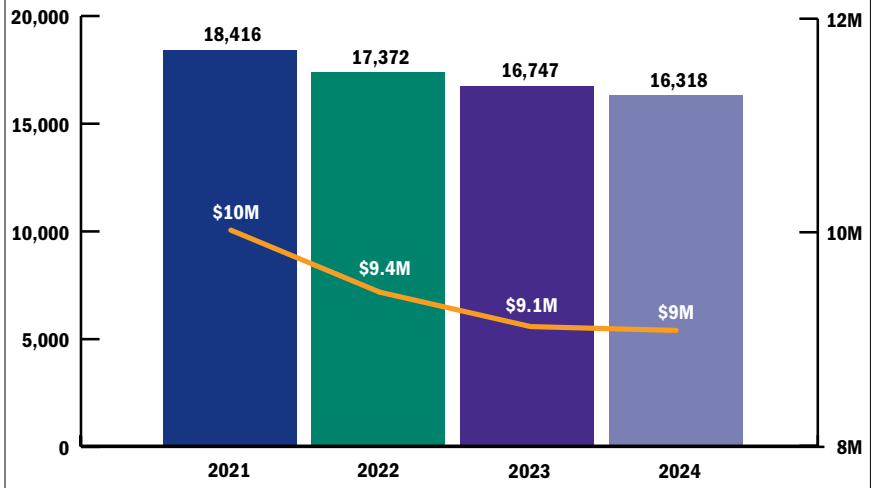
per enrollee. AABD cash payments are paid with 100% state general funds and can range anywhere from $18 per person to $198, depending on the living arrangement of the person receiving the payment.

To qualify for AABD cash assistance an individual must meet the following eligibility requirements:

- Be aged or disabled to qualify for the cash payment and must receive SSI
- The living arrangement of the person will determine the amount of cash assistance they receive. People who live in a certified family home or residential assisted living facility are not eligible for AABD cash benefits

On average, 16,318 people received AABD cash payments each month during SFY 2024.

**AABD: AVERAGE MONTHLY INDIVIDUALS RECEIVING CASH PAYMENT AND TOTAL ANNUAL BENEFITS PROVIDED**




## Child Support Services

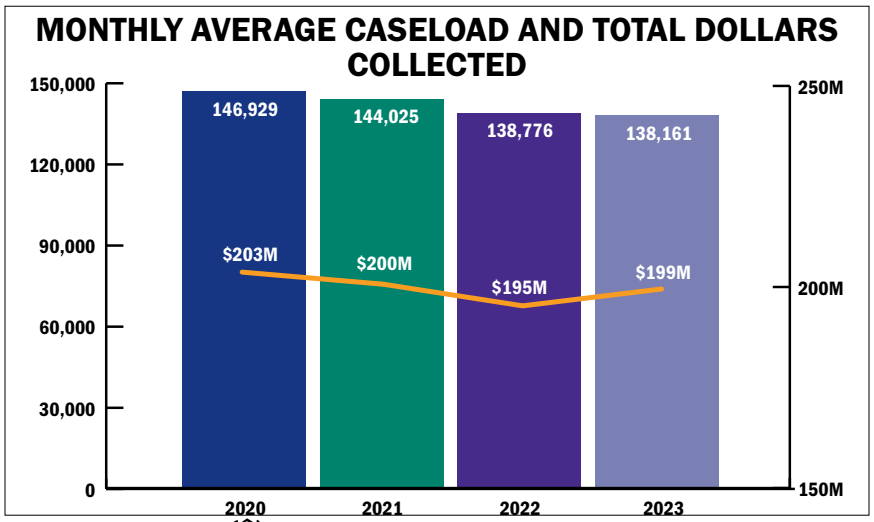
The Division of Self-Reliance manages Idaho's Child Support Program. Child Support Services processes payments for all child support orders in Idaho. A parent or guardian may receive additional enforcement services if they apply or are referred by the state benefits programs.

When a parent or guardian applies or is referred for services, Child Support Services may establish a paternity and child support order, modify an existing child support order, and take a variety of enforcement actions to collect child support. Enforcement actions include wage and income withholding, tax offsets, liens, license suspension, credit reporting, passport issuance and renewals blocks, financial account seizure, and pursuing criminal contempt in court.

In FFY 2024, Child Support Services provided services for 219,364 individuals and administered 138,161 child support cases. Of those, 82,408 were enforced cases. The program collected more than $199.5 million, with $171.0 million of the collections going toward enforced cases.

About 58% of families with a child support case participated in a benefit program. DHW's goal is to ensure that parent's receive the support needed to provide for their children while increasing the family's ability to be self-reliant. Child support is often the stabilizing factor in ensuring the basic needs of children are met.

**MONTHLY AVERAGE CASELOAD AND TOTAL DOLLARS COLLECTED**



## Intergovernmental Child Support Services

Idaho provides intergovernmental services to parents living in Idaho when the other parent lives in another state, a U.S. territory, on tribal land, or in a foreign country. Idaho has reciprocity with all states in the U.S. and its territories. In FFY 2024, Idaho had 46 international cases, where one parent lives in another country with reciprocity in Idaho.

| | |
|---|---|
| **Australia** | 4 |
| **Canada** | 20 |
| **England** | 5 |
| **Germany** | 11 |
| **New Zealand** | 1 |
| **Poland** | 2 |
| **Portugal** | 1 |
| **Sweden** | 2 |

# PARTNERSHIP PROGRAMS

Partnership programs include a variety of services delivered across the state by local organizations, both public and private. Partner programs provide participants with emergency support, transportation, employment, home utility expenses, home weatherization, and food/nutrition services.

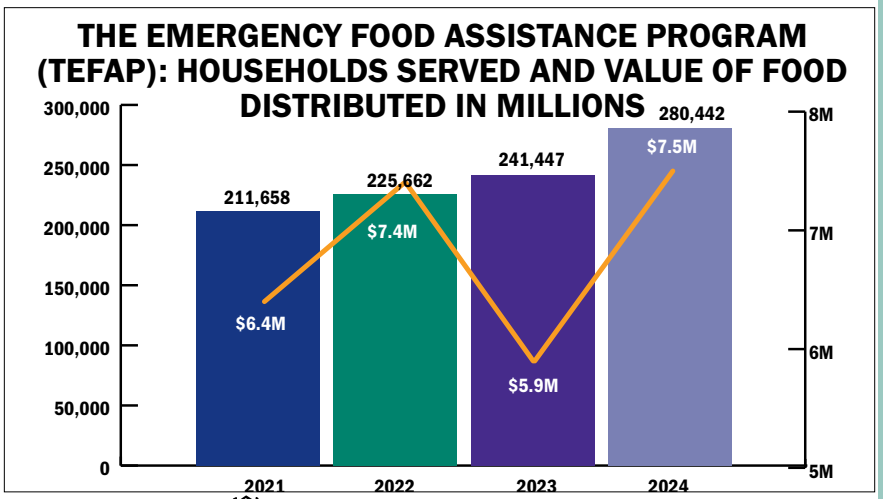
Much of the funding for these services comes from federal grants. These services provide additional support for low-income families and can often meet their needs, so they do not have to access DHW programs.

Partnership programs can also bridge the gap for individuals and households transitioning from other DHW programs and services to achieve full self-reliance.

Community Action Agency members help eligible community members in their regions through the following programs:

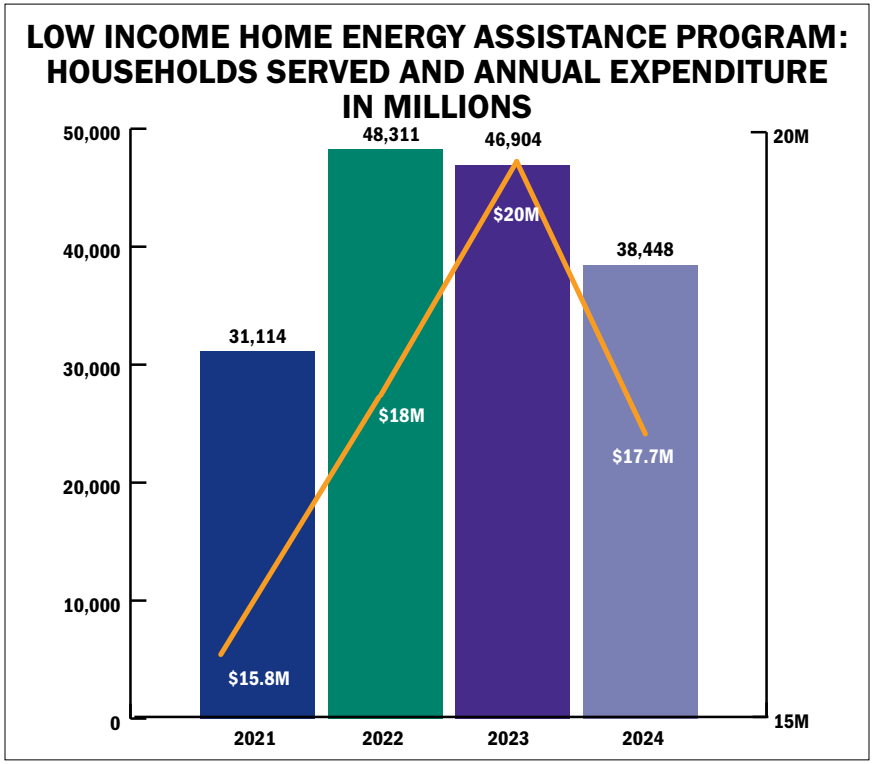
**The Emergency Food Assistance Program (TEFAP)** supplements the diets of Idahoans in low-income households by providing them with emergency food assistance at no cost. Food for TEFAP is purchased from production surpluses and distributed across the state.

In Idaho, community action agencies and food banks distributed TEFAP food through their warehouses to a statewide network of food pantries and soup kitchens. In SFY 2024, TEFAP distributed 5.3 million pounds of food valued at $7.5 million to 280,442 households.

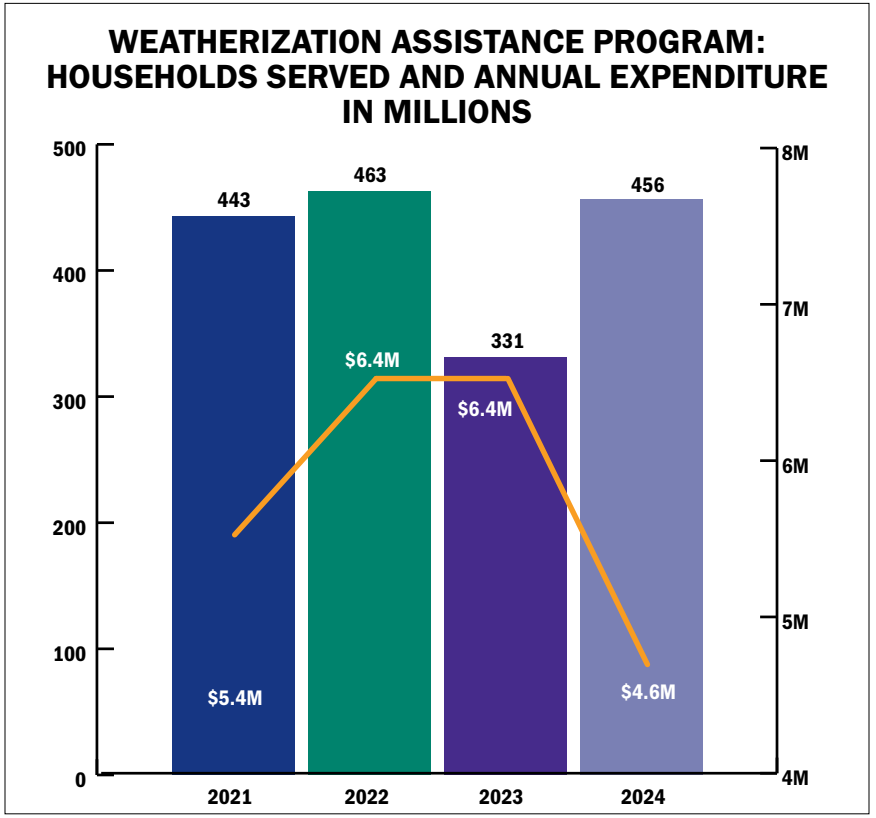


**Community Services Block Grant (CSBG)** provides funding that helps alleviate poverty and enable families and individuals to become self-reliant. CSBG funds are distributed through local community action agencies and the Community Council of Idaho. Funds can be used to provide direct services to clients, or they can be leveraged to support other programs and services the agencies provide including employment- readiness training, individual and family development counseling, food, housing, and transportation assistance. The approximately $3.8 million in CSBG funding that was spent in SFY 2024 helped to assist 56,552 individuals.

**Low Income Home Energy Assistance Program (LIHEAP)** supports several energy conservation and education programs for low-income individuals. It also pays a portion of energy costs for qualifying households. LIHEAP is managed by local community action agencies that make utility payments directly to suppliers on behalf of eligible beneficiaries. The program helped 38,448 households pay $17.7 million in energy costs in SFY 2024.




**Weatherization Assistance Program** helps low-income families conserve energy, save money, and improve living conditions by upgrading and weatherizing their homes. Idaho's weatherization program is funded by utility companies, the U.S. Department of Health and Human Services, the Bonneville Power Administration, and the U.S. Department of Energy. Eligible efficiency measures include air sealing (weather-stripping and caulking), wall and ceiling insulation, heating system improvements or replacement, efficiency improvements in lighting, hot water tank and pipe insulation, and appliance replacement. The Weatherization Assistance Program provided $4.6 million for efficiency improvements to 456 Idaho households in SFY 2024.



# INDEPENDENT COUNCILS

IDAHO COUNCIL ON DEVELOPMENTAL DISABILITIES

Idaho Council ON Domestic Violence AND Victim Assistance

The Department of Health and Welfare partners with internal and external stakeholders to deliver services to promote the health and wellbeing of Idahoans.

In some cases, the department serves as a conduit through which state funding is appropriated to independent councils. Budgeted councils in 2024/2025 include the Idaho Council on Developmental Disabilities and the Idaho Council on Domestic Violence and Victim Assistance.

This appropriation is made under statutory authority granted by the Idaho Legislature under 39-5203 and 67-6703.

Appropriated funding is channeled through the DHW budget, but the councils are independent and not administered by DHW.



# IDAHO COUNCIL ON DEVELOPMENTAL DISABILITIES

**CHRISTINE PISANI, EXECUTIVE DIRECTOR**
**208-334-2178**

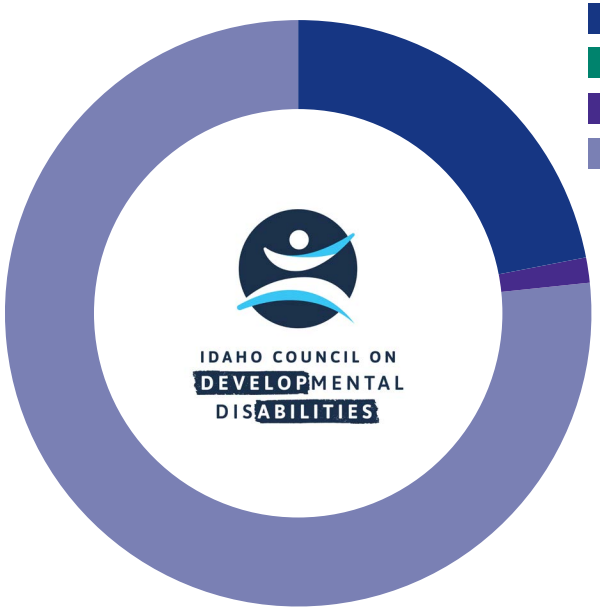
The Idaho Council on Developmental Disabilities works closely with people with intellectual and developmental disabilities and families, Idaho Department of Health and Welfare, The Center on Disabilities and Human Development, Disability Rights Idaho, the American Civil Liberties Union, Developmental Disability Service Providers, and others in the Community NOW! stakeholder collaborative. Community NOW! is focused on supporting people with intellectual and developmental disabilities and family advocates to lead in shaping the adult developmental disability service system. Direct communication with members of the class of the K.W. v. Armstrong lawsuit is part of the settlement agreement.

To enhance the leadership of people with intellectual and developmental disabilities in Community NOW!, the council contracted with a skilled meeting facilitator, who supports the learning and skill development of one person with a developmental disability and two family members to learn the skills of leading Community NOW! meetings. These meeting leaders facilitated virtual Community NOW! meetings and the first in-person Community NOW! meeting since the COVID-19 pandemic. During the in-person meeting, attendees received updates about the K.W. v. Armstrong lawsuit, the Idaho Living Well grant, and Community NOW! members discussed their vision for Person-Centered Planning in Idaho. The facilitation of the Community NOW! meeting by people with developmental disabilities and family members has moved Community NOW! to a role model of leadership by and for participants served by the adult developmental disability service system.

One of the recommendations made by Community NOW! is the implementation of Person-Centered Planning in Idaho. The council contracted with the University of Missouri, Kansas City, for their expertise with the Charting the LifeCourse Nexus Training and Technical Assistance Center to develop a Community of Practice on Person-Centered Planning. Community of Practice partners meet monthly at virtual Roundtables where planners share innovative techniques, tools, and challenges.

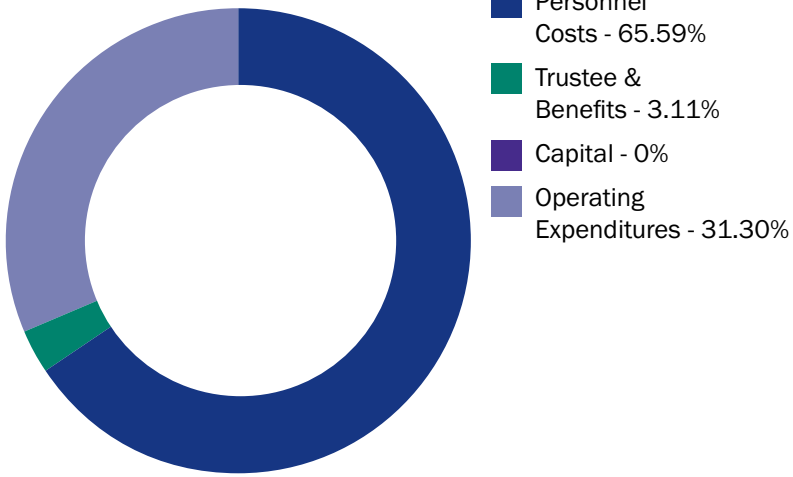
The council invested in creating certified trainers to provide Person-Centered Thinking training to people with intellectual and developmental disabilities, family members, and those who work in the field. Training covered skills that help others get to know people with intellectual and developmental disabilities, discover how to best support people, and keep learning from the person along the way. Since 2020, Idaho's six Person-Centered Thinking trainers have provided training to 438 people. In a follow-up survey among attendees of this training, respondents shared how they are still using the person-centered tools that were introduced during the training: "We used these tools by implementing them into helping our staff work better with our clients, get to know our clients even better, and us as supervisor get to know our staff better."

## SFY 2025 FUNDING SOURCES




*Authorized FTP: 6; Original appropriation for SFY 2024: general funds $224,600, total funds $1,016,100; Combined, both councils constitue .28% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES



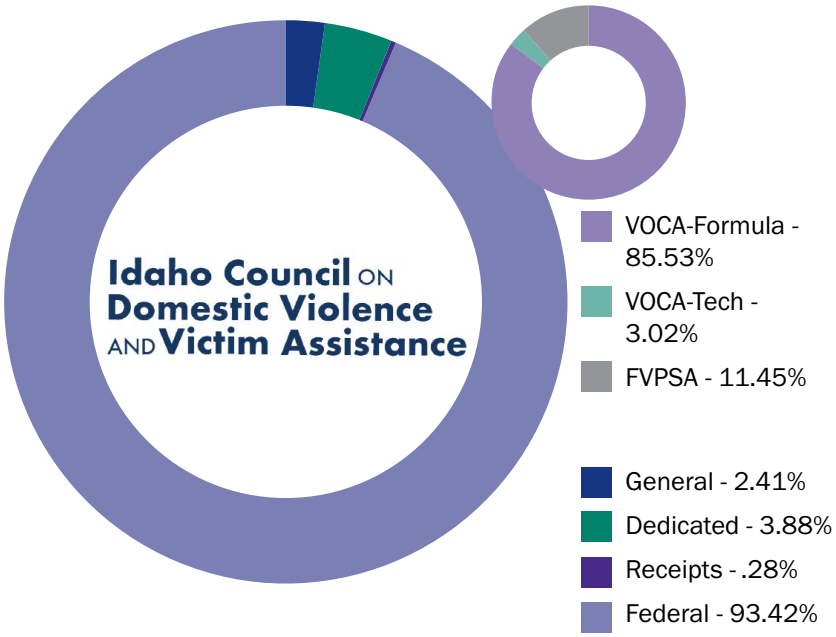
# IDAHO COUNCIL ON DOMESTIC VIOLENCE AND VICTIM ASSISTANCE

**DANA WIEMILLER, EXECUTIVE DIRECTOR**
**208-332-1540**

The Idaho Council on Domestic Violence and Victim Assistance (ICDVVA) is an independent council created in 1982 by the Idaho Legislature to address the disruptive influence of domestic violence on society, provide protection and refuge for victims, and fund services for victims of crime throughout the state. ICDVVA funded 43 victim service programs in SFY 2024: 37 nonprofit agencies, five local government/systems-based programs, and one tribal victim service program.

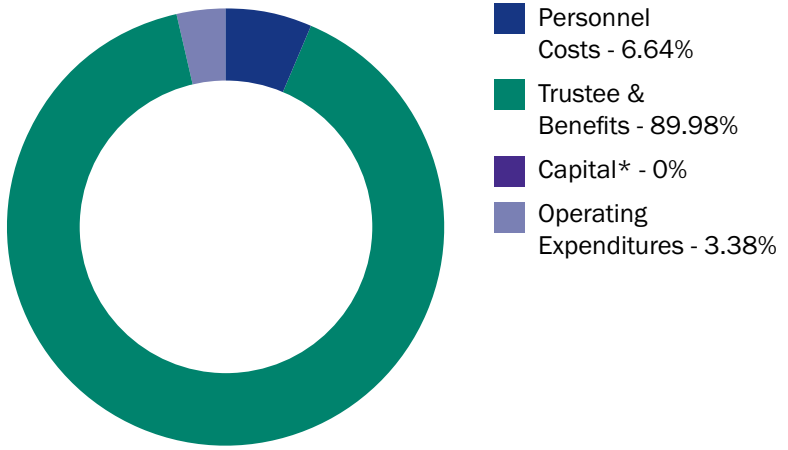
ICDVVA responsibilities include: administration of federal and state grant funds for nonprofit, community, and government programs serving victims of crime; advocating for legislation that supports the rights of crime victims; developing standards for programs serving victims of domestic violence, sexual assault, and other crimes; setting minimum standards for domestic violence offender intervention service providers; and training and public awareness about violence and victim assistance. The council is assigned to the Department of Health and Welfare for budgetary and administrative purposes but is programmatically independent.

## SFY 2025 FUNDING SOURCES & SOURCE OF FEDERAL FUNDING




*Authorized FTP: 6; Original appropriation for SFY 2024: general funds $337,900, total funds $14,099,600; Combined, both councils constitue .28% of DHW funding.*

## SFY 2025 EXPENDITURE CATEGORIES




**Funding can not be used for Capital expenditures.*

## Prioritizing direct victim services and encouraging diversified funding resources

ICDVVA prioritizes direct victim services in funding decisions. In SFY 2024 programs were required to have at least 60% of their requested budget for direct services as part of their application, and in scoring, bonus points were awarded to programs that were geographically isolated, reported that demand for services exceeded supply in their area, and served populations defined by ICDVVA as underserved. Scoring also evaluated program reliance on ICDVVA funding and awarded higher point values for programs who were seeking alternative funding resources, increasing their fundraising efforts, and, thereby, reducing their reliance on ICDVVA funding. As a result, 88% of FY2024 program budgets were for direct victim services.

## Ensuring data-driven funding decisions

IDAPA rules were updated during the 2023 legislative session to ensure regional need and demand for services are considered in funding distribution. A new Crime Victim Services Data Dashboard was launched in 2023 after a multi-year, multi-agency collaboration with the Idaho State Police Statistical Analysis Center that brings together data on reported crime, victim services, and community demographics. This dashboard allows data to be viewed over time and at the public health region and county levels. Armed with reliable victim services data, ICDVVA implemented the new IDAPA rules with its FFY24 grant awards, which allowed for the allocation of limited resources to where they are most needed.

## Enhancing Grant Administration Systems and Efficiency

ICDVVA used a $500k federal award to obtain a grant management system. ICDVVA partnered with the State Controller's Office to procure a system that could be leveraged to improve grant award and administration management across multiple state agencies. ICDVVA was the first to implement the system in October 2023. Two additional agencies also implemented the system in 2024 with another eight agencies working towards implementation.

## Ensuring access for all victims of crime

A key priority for ICDVVA has been to engage in collaboration, education, and outreach to improve access to services for underserved victims of crime. ICDVVA and the Idaho Council on Developmental Disabilities have partnered on an effort to identify standards to improve services for victims with developmental disabilities. ICDVVA continued its collaboration with the Idaho Council for the Deaf and Hard of Hearing by providing training and resources to improve services for victims who are deaf or hard of hearing. Regional Roundtables featured training to assist victim services programs in ensuring language access for victims with limited English proficiency. ICDVVA, in collaboration with the Governor's Children at Risk Task Force, hosted a two-day, multi-disciplinary conference featuring break-out sessions and interactive simulations to share knowledge and data to strengthen and enhance victim services in Idaho.

Learn more about these initiatives in the council's strategic plan, available on our website: https://icdv.idaho.gov/about/.

# ACRONYM GLOSSARY

**AABD** Aid to the Aged, Blind, and Disabled

**ACES** Adverse childhood experiences

**ACT** Assertive Community Treatment

**ADAP** Ryan White AIDS Drug Assistance Program

**ADRD** Alzheimer's Diseases and Related Dementia

**APC** Ambulatory Payment Classifications

**APRDRG** All-patient refined diagnosis related groups

**ARPA** American Rescue Plan Act

**BCH** Bureau of Community and Health

**BCM** Bureau of Care Management in Medicaid

**BEHCD** Bureau of Environmental Health and Communicable Disease

**BLTC** Bureau of Long Term Care in Medicaid

**BOCAPS** Bureau of Clinical and Preventive Services

**CANS** Child and Adolescent Needs and Strengths

**CDC** Centers for Disease Control and Prevention

**CFS** Child and Family Services

**CMS** Centers for Medicare and Medicaid Services

**CPCS** Crisis Prevention and Court Services

**CSBG** Community Services Block Grant

**CY** Calendar year

**CYFS** Children, Youth, & Family Services

**DBH** Division of Behavioral Health

**DD** Developmental Disabilities

**DHW** Department of Health and Welfare

**DPH** Division of Public Health

**EDRS** Electronic Death Registration System

**EMS** Emergency Medical Services

**EMSAVE** EMS Agency Vehicle and Equipment Grant

**EMSC** Emergency Medical Services for Children

**EMSSTF** EMS Sustainability Task Force

**EPSDT** Early Periodic, Screening, Diagnostic and Treatment

**EVV** Electronic visit verification

**FACS** Family and Community Services

**FFS** Fee for service

**FFY** Federal fiscal year

**FHIR** Fast Health Care Interoperability Resources

**FMAP** Federal Medical Assistance Percentage

**FPL** Federal poverty limit

**FVPSA** Family Violence Prevention and Services Act

**GHI** Get Healthy Idaho

**HCBS** Home and Community Based Services

**HPSA** Health Professional Shortage Area

**IBHC** The Idaho Behavioral Health Council

**IBL** Idaho Bureau of Laboratories

**ICDD** Idaho Council on Developmental Disabilities

**ICDVVA** Idaho Council on Domestic Violence and Victim Assistance

**ICF/IID** Intermediate care facility for individuals with intellectual Disabilities

**ICPC** Interstate Compact on the Placement of Children

**IFPP** Idaho Family Planning Program

**IHVP** Idaho Home Visiting Program

**IMD** Institutions for mental disease

**IMPlus** Idaho Medicaid Plus, a mandatory program in certain Idaho counties for adults who have not enrolled in the MMCP but are eligible for both Medicare and Medicaid

**IOHP** Idaho Oral Health Program

**IPAN** Idaho Physical Activity and Nutrition Program

**IRIS** Idaho's Immunization Reminder System

**IROC** Idaho's Response to the Opioid Crisis

**ITP** Infant Toddler Program

**ITSD** Information and Technology Services Division

**LIHEAP** Low-Income Home Energy Assistance Program

**MAT** Medication Assisted Treatment

**MCH** Maternal and Child Health Program

**MCO** Managed Care Organization

**MMCP** Medicare Medicaid Coordinated Plan, a plan for people who are eligible and enrolled in both Medicare and Medicaid, also known as dual eligibles

**MMIS** Medicaid Management Information System

**MMRC** Maternal Mortality Review Committee

**MOE** Maintenance of Effort

**MPX** Monkeypox

**NEMT** Non-Emergency Medical Transportation

**OAP** Office of Accreditation and Planning

**OHPI** Office of Healthcare Policy Initiatives

**OIP** Offender Intervention Program

**OPPS** Office of Policy, Performance, and Strategy

**PA** Prior authorization

**PASRR** Pre-admission screening and resident review

**RHCAP** Rural Healthcare Access Program

**RNLRP** Rural Nursing Loan Repayment Program

**RPIP** Rural Physician Incentive Program

**RSV** Respiratory Syncytial Virus

**RWPB** Ryan White Part B Program

**SABG** Substance Abuse Prevention and Treatment Block Grant

**SFY** State fiscal year

**SHN** State Hospital North

**SHS** State Hospital South

**SHW** State Hospital West

**SLRP** State Loan Repayment Program

**SNAP** Supplemental Nutrition Assistance Program, also known as Food Stamps

**SPA** State plan amendment

**SSI** Social Supplemental Income

**SR or S-R** Division of Self-Reliance

**SUD** Substance Use Disorders

**START** Systemic, Therapeutic, Assessment, Resources, and Treatment

**StateComm** Idaho State EMS Communications Center

**SVP** Sexual Violence Prevention Program

**SWITC** Southwest Idaho Treatment Center

**TAFI** Temporary Assistance for Families in Idaho

**TEFAP** The Emergency Food Assistance Program

**TIEH** Treatment for individuals experiencing homelessness

**TMSIS** Transformed Medicaid Statistical Information System

**TPL** Third party liability

**TSE** Time Sensitive Emergencies

**UM** Utilization Management Team

**VCO** Value Care Organization

**VFC** Vaccines for Children

**VOCA** Victims of Crime Act

**WIC** Women, Infants, and Children

**YES** Youth Empowerment Services

A publication of

IDAHO DEPARTMENT OF HEALTH & WELFARE

450 W. State St.
Boise, Idaho, 83720-0036
208-334-5500

healthandwelfare.idaho.gov
Communications@dhw.idaho.gov
Published January 2025

State fiscal year 2024 is from July 1, 2023 - June 30, 2024
State fiscal year 2025 is from July 1, 2024 - June 30, 2025